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# Transitional Housing for Survivors of Domestic and Sexual Violence: A 2014-15 Snapshot

## Chapter 3: Program Housing Models

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# Chapter 3: Program Housing Models

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Any and all errors and omissions are the fault of the author, Fred Berman.

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## Note about the Use of Gendered Pronouns and Other Sensitive Terms

For the sake of readability, this report follows the example of numerous publications -- for example, by the National Center on Domestic Violence, Trauma & Mental Health (NCDVTMH)<sup>1</sup> and the Missouri Coalition of Domestic and Sexual Violence<sup>2</sup> -- and uses feminine pronouns to refer to adult victims/survivors of domestic and sexual violence, and masculine pronouns to refer to the perpetrators of that violence. This report also uses feminine pronouns to refer to the provider staff of transitional housing programs that serve survivors. The use of those pronouns in no way suggests that the only victims are women, that the only perpetrators are men, or that the provider workforce is entirely female. Indeed, the victims and perpetrators of domestic and sexual violence can be male or female or transgender, as can the staff that support their recovery, and the shortcut herein taken is merely used to keep an already long document from becoming less readable.

Although the terms "victim" and "survivor" may both refer to a person who has experienced domestic or sexual violence, the term "survivor" is used more often in this document, to reflect the human potential for resilience. Once a victim/survivor is enrolled in a program, she is described as a "program participant" or just "participant." Participants may also be referred to as "survivors," as the context requires. Notwithstanding the importance of the duration of violence and the age of the victim, we use the terms "domestic violence" and "intimate partner violence" interchangeably, and consider "dating violence" to be subsumed under each.

Although provider comments sometimes refer to the perpetrator of domestic violence as the "abuser" or the "perpetrator," this report refers to that person as the "abusive (ex-)partner," in acknowledgement of their larger role in the survivor's life, as described by Jill Davies in her often-cited [Advocacy Beyond Leaving](#) (2009).

Finally, although the Office on Violence Against Women funds transitional housing programs to address the needs of not only domestic violence survivors, but also survivors of sexual assault, stalking, and/or dating violence, the preponderance of program services are geared to DV survivors, the large majority of TH program clients are survivors of domestic violence, and much of the literature and most of the provider quotes are framed as pertaining to domestic violence. Consequently, much of the narrative is framed in terms of addressing "domestic violence" or "domestic and sexual violence," rather than naming all the constituencies.

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<sup>1</sup> As stated on page 2 of the NCDVTMH's [A Systematic Review of Trauma-Focused Interventions for Domestic Violence Survivors](#) by Warshaw, Sullivan, and Rivera (2013):

*"Although many couples engage in mutual or low-level violence that does not alter the power dynamics within their relationship, the larger social problem of "battering" is a form of gender-based violence characterized by a pattern of behavior, generally committed by men against women, that the perpetrator uses to gain an advantage of power and control over the victim (Bancroft, 2003; M. P. Johnson, 1995; Stark, 2007). Such behavior includes physical violence and the continued threat of such violence but also includes psychological torment designed to instill fear and/or confusion in the victim. The pattern of abuse also often includes sexual and economic abuse, social isolation, and threats against loved ones. For that reason, survivors are referred to as "women" and "she/her" throughout this review, and abusers are referred to as "men" and "he/him." This is meant to reflect that the majority of perpetrators of this form of abuse are men and their victims are women. Further, the bulk of the research on trauma and IPV, including the studies that met the criteria for this review, focus on female victims of abuse. It is not meant to disregard or minimize the experience of women abused by female partners nor men abused by male or female partners."*

<sup>2</sup> As stated on page 2, of the Missouri Coalition's [Understanding the Nature and Dynamics of Domestic Violence](#) (2012)

*"The greatest single common denominator about victims of domestic violence is the fact that the overwhelming majority are women. According to the most comprehensive national study by the U.S. Department of Justice on family violence, the majority of domestic violence victims are women. Females are 84 percent of spouse abuse victims and 86 percent of victims at the hands of a boyfriend or girlfriend. The study also found that men are responsible for the vast majority of these attacks—about 75 percent. (Durose et al., 2005) And, women experience more chronic and injurious physical assaults by intimate partners than do men. (Tjaden & Thoennes, 2000) That's why feminine pronouns are used in this publication when referring to adult victims and masculine pronouns are used when referring to perpetrators of domestic violence. This should not detract from the understanding that, in some instances, the perpetrator might be female while the victim is male or of the same gender."*

## 1. Executive Summary

The configuration and funding of program housing and the way housing assistance is allocated influence the way a transitional housing (TH) program operates, and the participants it is able and best suited to serve. Housing models can be distinguished in terms of housing ownership (mainstream landlord, non-profit housing provider, victim services agency, etc.); who signs the lease (provider or participant); the housing configuration (congregate, clustered, or scattered-site); and whether participants can opt to keep their unit (i.e., "transition-in-place") or must vacate the unit and find and transition to other housing once their term of assistance ends ("temporary" or "traditional TH"). Different providers implement the same model in different ways, for example, by varying the amount, duration, and scope of assistance with housing-related costs).

Chapter 3 reviews the various housing models used by TH programs, their similarities and differences, and the implications of using particular models or taking particular approaches to implementing those models.

Sections of this chapter examine -- from both the vantage point of a provider and a participant<sup>3</sup> -- the strengths and challenges of each model, and the factors that may influence the decision about which type of housing is the "best fit" for a given survivor, assuming a program offers more than one housing option. In discussing "best fit" considerations, we explore participant-specific factors (e.g., household size, income prospects, tenancy "credentials," safety issues, participants' desire to remain connected to their home community versus desire to avoid such contact, and participants' desire for formal and/or peer support); environmental conditions (e.g., the housing market, job market, and access to transportation and community-based services); and the strengths and limitations of grants from the primary funders of TH programs: the OVW's Transitional Housing Assistance Grants Program and the US Department of Housing and Urban Development's (HUD's) Continuum of Care (CoC) and Emergency Solutions Grants (ESG) programs.<sup>4</sup>

Chapter 3 also explores how specific aspects of the various housing models or accompanying regulatory requirements may enhance or limit a program's ability to serve survivors with different needs, attributes, strengths, and challenges. Because most regions of the country are served by, at most, one or two specialized TH programs,<sup>5</sup> and because, as discussed in [Chapter 2](#) ("Survivor Access and Participant Selection"), the need and demand for specialized TH programs far exceeds the supply, survivors of domestic or sexual violence do not necessarily have a choice about the type of program housing they will enter when they are ready to move on from a DV shelter or other interim living arrangement.

Keeping in mind the respective strengths and limitations of the different housing models, the narrative discusses trends toward increased reliance on participant-leased, scattered-site, transition-in-place programs, which have only been accelerated by HUD's funding decisions terminating grants to some traditional TH projects and expanding the number of Rapid Rehousing (RRH) projects. The narrative cites two national models that used supplemental funding to overcome some of the regulatory constraints on the RRH model, enabling it to effectively serve subpopulations that it is ordinarily less well able to serve.

The chapter includes numerous provider comments describing their use of the different housing models, the successes, the challenges they have encountered, and how they have addressed those challenges.

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<sup>3</sup> As noted in the Methodology Appendix, collecting the feedback of survivors served by these programs was deemed by the OVW to be outside the scope of the Technical Assistance grant that generously funded this project, so the term "participant perspective" describes the vantage point, rather than the actual source of the information.

<sup>4</sup> We distinguish between HUD regulations and state/county/jurisdiction-specific "written standards" -- which may be assumed by providers to be HUD regulations -- that entities administering HUD grants must develop (with community input) and implement, governing eligibility and priority for assistance, and the amount, duration, and scope of assistance.

<sup>5</sup> As used in this report, the term "specialized TH program" means a traditional transitional housing program or a transition-in-place or rapid rehousing program, which may be funded by OVW, HUD, and/or other source(s); operated by a victim services provider; and targeting assistance to survivors of domestic or sexual violence. Unless preceded by the word "mainstream," the term "TH program" should be assumed to refer to a "specialized TH program."

## 2. Introduction and Overview

### (a) Overview

The way the units of program housing are configured and funded influences the way a transitional housing (TH) program operates, whom it is able and best suited to serve, and whether program participants will be able to remain in those units after their program participation ends, or whether they will have to find and move to other housing. The differences between and among program housing models are largely defined in terms of the following parameters:

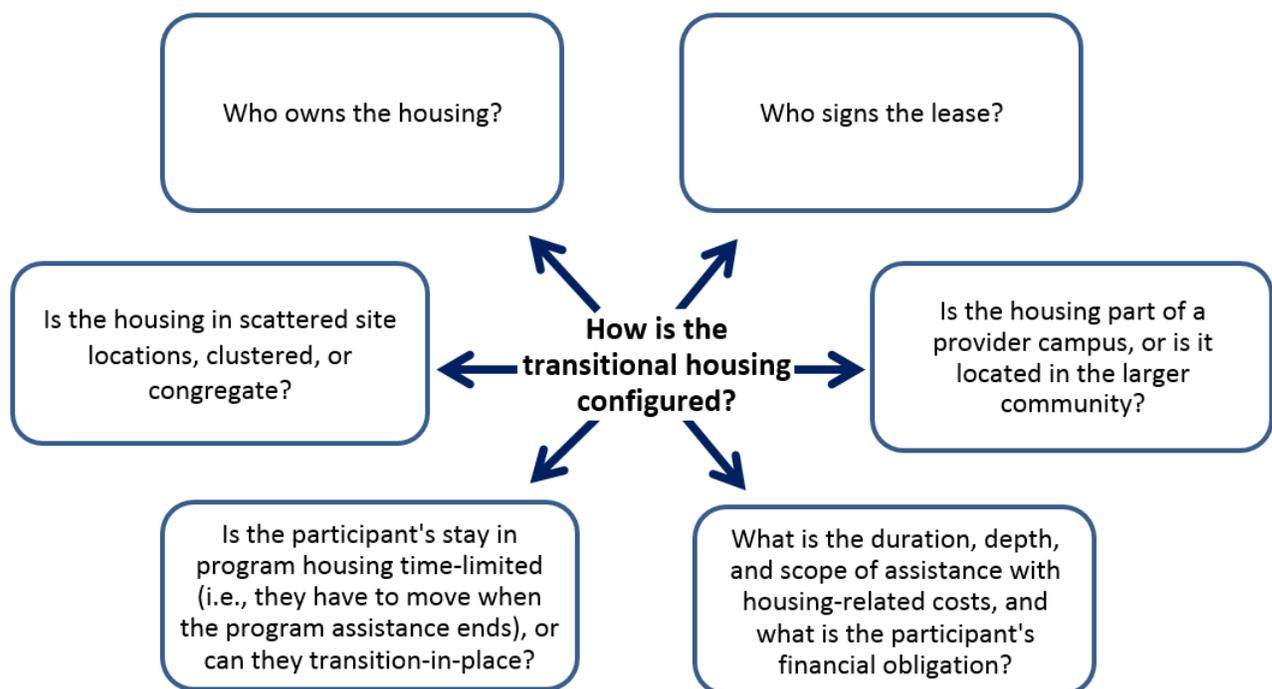
- ***Who owns the housing? Who signs the lease?*** Housing may be owned by the TH provider agency or leased from a private landlord or a housing authority or a non-profit affordable housing provider. If housing is owned by an entity other than the TH provider agency, the lease can either be held by the TH provider agency which, in turn, sublets to the participant, or the lease can be in the participant's name. If the provider agency is the leaseholder, they may or may not require the participant to pay a portion of the monthly housing-related costs; if the participant is the leaseholder, and the provider offers time-limited assistance with rent and/or utilities, the provider may have a contractual arrangement with the property owner governing those payments, or the provider may just issue checks to the property owner/landlord, based on documentation furnished by the program participant.
- ***Is the housing congregate, clustered, or scattered-site?*** The units may be part of a congregate or communal living situation in a house or apartment, owned or leased by the TH provider agency, and staffed by that provider; or they may be clustered in one or several buildings owned or leased by the TH provider agency, or reserved for and leased by TH program participants, pursuant to an agreement between the building owner and the TH provider agency; or they may be in scattered locations in the provider's service area, selected by the participants or the provider, depending on how the program works. The TH provider agency could be the leaseholder of a scattered-site unit for the entire time the participant is in the program, or the participant could be the leaseholder for their entire stay in the program, or the lease could start off in the TH provider agency's name and shift to the participant.
- ***Is TH provider agency-owned housing located on a program campus or in the community?*** Units of provider owned housing may be located on the campus of the TH provider agency's shelter, offices, and non-residential programming; may be attached to the provider's shelter facility; or may be located in a residential neighborhood, where the units may or may not be identifiable as program housing.
- ***How does the program allocate funding to assist participant with their housing-related costs?*** OVW TH Program grants allow providers considerable flexibility in determining the amount, duration, and scope of financial assistance with housing-related costs; as will be discussed at various points in this chapter, grants from the US Department of Housing and Urban Development's (HUD's) Continuum of Care (CoC)<sup>6</sup> and Emergency Solutions Grant (ESG) programs<sup>7</sup> are more prescriptive regarding the parameters of the financial assistance made available to program participants.
  - ***What is the duration of housing assistance?*** -- 6 mos., 12 mos., 18 mos., 24 mos., other?
  - ***What is the depth of financial assistance?*** -- full rent, fixed monthly amount, difference between rent and 30%-of-the-participant's adjusted net income, diminishing assistance over time, other?

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<sup>6</sup> The term "Continuum of Care" refers to both the HUD Continuum of Care grant program and to the consortium of geographically-related providers, government entities, and other stakeholders that exists to oversee the use of HUD CoC grant funds and to provide regional planning, coordination, and support for efforts to prevent and address homelessness.

<sup>7</sup> As discussed in the Methodology Appendix, 42% of the providers interviewed for this project utilize such HUD grants to support their transitional housing (or rapid rehousing/transition-in-place) programs.

- **What is the scope of financial assistance?** -- rent, utilities, arrearages, move-in costs, other?
- **Is any portion of the participants' contributions to housing costs returned to the participant** (e.g., for move-in costs, tuition costs, purchase of a car, other special or routine living costs)?
- **Is the housing time-limited or can a participant transition-in-place?**
  - **Is the program housing a temporary place to live** while a participant heals and prepares for the next phase of her life (including finding permanent housing before time runs out in the TH program) - **or** -
  - **Is the program housing the participant's future permanent home**, if she wants it to be (and can afford the cost), where the focus, while she's in the program, is on healing, (re)integrating into the community, and working to ensure that by the time financial assistance from the TH program ends, she can financially sustain her housing and other costs.



This chapter explores the advantages and challenges attendant to each of the TH program housing models and to the various approaches used to financially assist program participants with their housing-related costs.

### **(b) What Factors Determine the Type of Housing that is the Best "Fit" for Each Survivor?**

As illustrated in the provider comments and the text that precedes them, many factors play a role in determining which approach is the best fit for a particular survivor; for example:

- Participants' family size and caregiving responsibilities, if any;
- Participants' income/assets, employability, and "credentials" as a prospective tenant (i.e., their ability to earn the confidence of a prospective landlord, which may depend, in part, on their income, credit, housing history including prior evictions, landlord references, outstanding rent or utility arrearages, etc.);
- Participants' actual and perceived safety, and vulnerability to threats from the abuser they fled;
- Participants' desire to be close to the community they left (e.g., to maintain relationships with family members or friends, to be close to religious or civic organizations with which they were affiliated, to

enable their children to maintain school connections, etc.) versus leaving that community (e.g., to avoid encounters with their (ex-)partner, to avoid pressure from friends or family members to return, etc.);

- Participants' desire for accommodations to address disability-related needs;
- Participants' desire for ready access to program staff or peers versus desire for independence;
- Participant's preference for congregate living versus their own apartment, if options are available;
- Participants' need for access to employment, transportation, children's schools or childcare, health care and/or social services, legal assistance, place of worship, and other necessary services and amenities;
- Availability of decent, safe, affordable housing and/or housing where subsidies can be used;
- Availability of employment that participants are qualified to fill and that provide adequate compensation;
- Availability of childcare, transportation, affordable health/mental health/dental care and coverage;

### **(c) How does the Source of Funding (OVW versus HUD) Affect the Housing Model?**

As is discussed at greater length in [Chapter 12](#) ("Funding and Collaboration: Opportunities and Challenges"), the *source of funding and requirements and expectations attached to that funding can have a determinative influence on what a program looks like and how it operates*, and, therefore, on the types of survivors it is able -- and best-suited -- to serve.

As noted in the Methodology Appendix, 42% of the providers interviewed for this project receive HUD CoC and/or ESG grants to help fund their transitional housing (and rapid rehousing/transition-in-place) programs for survivors of domestic/sexual violence who have become homeless. In many cases, the annual amount of HUD funding exceeds the amount of the provider's OVW TH grant. The regulations governing those HUD funding streams, known as the [CoC Interim Rule](#) and the [ESG Interim Rule](#), *distinguish between transitional housing and housing in which participants receive Rapid Rehousing (RRH) grant-funded rental assistance*, and prescribe how each kind of project should be operated and how HUD funds may be used.<sup>8</sup> Providers must understand those regulations to ensure compliance, and to inform decisions about which participants might be best served using each kind of funding, if they have more than one program. Some key differences include:

- Participants in CoC-funded *transitional housing* (TH) must have a month-to-month (or longer) lease in their name or, if the lease is in the provider agency's name, the participant must have a comparable occupancy agreement. Participants in units assisted with *CoC RRH grants* must have a lease in their name for an initial term of one year that is renewable, except for cause, on a monthly or longer term basis. Most participants in units assisted with *ESG RRH grants* must have a month-to-month (or longer) lease in their name. (Participants in the very few ESG RRH-assisted "project-based" units<sup>9</sup> must have one-year leases.) OVW TH grants do not include stipulations about who is named on the lease or its duration.
- Survivors can *only* be assisted by an *ESG-funded RRH* project if they meet the definition of "Category 1" homelessness (also known as "Literal Homelessness"), in [HUD's "Homeless Definition Final Rule"](#) (also

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<sup>8</sup> Rapid Rehousing (RRH) is the HUD housing assistance funding mechanism for many OVW transition-in-place programs. The OVW transition-in-place model places a heavier emphasis on supportive services, and programs implementing the OVW transition-in-place model typically envision a longer timeframe for participation than HUD and the Continuums of Care (CoCs), states, and jurisdictions that administer HUD grants. Another difference is that the OVW transition-in-place model allows providers to temporarily hold the lease (until participants who might not have had the income, credit, or landlord references to gain a lease on their own have earned the landlord's confidence, and can have the lease put in their name), whereas HUD's RRH model requires that the lease be in the participant's name from the start of the tenancy. RRH projects can be funded via CoC or ESG grants; [HUD Rapid Rehousing: ESG vs. CoC Guide \(2013\)](#) describes the similarities and differences in regulations governing rapid rehousing projects funded by these two types of grants.

<sup>9</sup> A project-based unit is an apartment that the victim services provider reserves under contract with the property owner for a year-at-a-time, guaranteeing to pay the rent, whether it is occupied or not.

explained in a [HUD fact sheet](#) outlining the criteria and documentation requirements for establishing eligibility under each category of homelessness). Survivors can be assisted by a **CoC-funded RRH** project or a **CoC-funded TH** project if they are "homeless" under **any** of the following categories:

- "Category 1" ("Literally Homeless") - persons living in shelter, transitional housing for homeless persons, motel unit paid for by charitable/public entity; in a place not meant for human habitation (e.g., the street, vehicle, abandoned building, etc.), and persons who were literally homeless, but who have spent up to 90 days in an institution (e.g., jail, treatment facility, etc.)
- "Category 2" ("Imminent Risk of Homelessness") - persons whose primary nighttime residence will be lost within 14 days, who have no identified subsequent residence, and who lack the resources or support networks needed to obtain other permanent housing
- "Category 4" ("Fleeing/Attempting to Flee DV") - persons fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; who have no other residence; and who lack the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing."

*(Note: HUD's "Category 3" applies to unaccompanied youth/young adults who do not meet any of the other three definitions of homelessness, and therefore is irrelevant to this discussion.)*

- HUD regulations require that units assisted with TH or RRH grants satisfy so-called [Housing Quality Standards \(HQS\)](#)<sup>10</sup> and that the combined rent/utility costs for those units not exceed [Fair Market Rent](#) levels or "reasonable rent" standards that are based on the cost of comparable units.<sup>11</sup> In some markets, these requirements make it difficult for participants and providers to find apartments that are eligible for HUD program assistance. OVW TH grants do not impose such requirements.
- In the case of CoC Transitional Housing (TH) grant-funded program, HUD regulations (24 CFR §578.77(b)) stipulate that there is no requirement that participants in a unit owned or leased by the provider be assessed an occupancy charge; however if the participant is expected to contribute to the cost of rent/utilities, the **maximum amount** they may be asked to pay is the larger of (i) 30% of their adjusted net income<sup>12</sup>, (ii) 10% of gross income, or (iii) the welfare payment housing allowance, if the participant is receiving public assistance. Per the definition of "transitional housing" in 24 CFR §578.3, the maximum duration of assistance in CoC TH is 24 months, "or such longer period as HUD determines necessary."

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<sup>10</sup> Housing Quality Standards (HQS) are the standards defined at [24 CFR §982.401](#) that specify "performance and acceptability criteria for these key aspects of housing quality: (A) Sanitary facilities; (B) Food preparation and refuse disposal; (C) Space and security; (D) Thermal environment; (E) Illumination and electricity; (F) Structure and materials; (G) Interior air quality; (H) Water supply; (I) Lead-based paint; (J) Access; (K) Site and neighborhood; (L) Sanitary condition; and (M) Smoke detectors. The HQS are typically more stringent than the local housing code, particularly in rural areas, require an inspection to affirm that the HQS have been met, and can make it challenging to find compliant properties.

<sup>11</sup> FMR levels define the maximum amount that HUD-assisted housing should cost to lease, including both the rent and certain utilities which the tenant might have to separately pay, including heat, hot water, and electricity, but not water or telephone service. In highly competitive rental markets, §578.51(g) of the [CoC Interim Rule](#) allows rental assistance funds to be used to support tenancies in apartments with rents that exceed the FMR, if the rent + utilities is "reasonable" considering the cost of comparable units, provided that the amount of HUD rental assistance does not exceed the FMR.

<sup>12</sup> Typically, the occupancy charge ceiling comes out to the 30% of adjusted net income standard, which is the same calculation used in HUD's Section 8/Housing Choice voucher program. For more information, see Chapter 5 "Determining Income and Calculating Rent" in the [HUD Occupancy Handbook for Subsidized Multi-Family Housing](#) and the [HUD's sample Income & Resident Rent Calculation Worksheet](#).

ESG and CoC Rapid Rehousing grants may be used to provide "short-term rental assistance" (up to 3 months) or "medium term rental assistance" (more than 3 months, and up to 24 months) or any combination of the two. The [OVW's annual solicitation for TH grant proposals](#) specifies a minimum anticipated length of stay of six (6) months and a maximum length of stay of 24 months, with a possible extension by up to six months, pursuant to a victim's request for a waiver, if she has made a good faith effort to acquire permanent housing but has not been able to do so (p.8)

As described in HUD's [Rapid Rehousing: ESG vs. CoC \(2013\)](#), the ESG and CoC rules define slightly different uses for RRH funds. For example, ESG RRH grants can be used to pay for up to six months of rent arrearages and/or utility arrearages and for ongoing utility costs; CoC RRH grants cannot be used for those purposes. Both ESG and CoC RRH grants can pay for security deposits, rental application fees, last month's rent, and startup utility deposits. Both ESG and CoC RRH-assisted tenancies require that leases be in the participant's name. The CoC RRH grant requires that leases cover a 12-month period, and be renewable, except for cause. With one largely irrelevant exception, the ESG RRH grant does not specify a minimum lease term.

It is important to understand that Continuums of Care overseeing CoC grants and states, counties, and jurisdictions administering ESG grants are all required to develop and implement **written standards** governing eligibility and priority for RRH assistance and certain parameters governing the nature of that assistance.

- As per §578. 7(a)(9) of the [CoC Interim Rule](#), "At a minimum, the written standards [that CoC's must develop] must include: (i) Policies and procedures for evaluating individuals' and families' eligibility for assistance [from CoC-funded projects]; (ii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance; (iii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance; [and] (iv) Standards for determining what percentage or amount of rent each program participant must pay<sup>13</sup> while receiving rapid rehousing assistance."

As per §578.37(a)(1)(ii)(B) of the [CoC Interim Rule](#), "These projects ... may set a maximum amount or percentage of rental assistance that a program participant may receive, a maximum number of months that a program participant may receive rental assistance, and/or a maximum number of times that a program participant may receive rental assistance." <sup>14</sup>

- As per §576.400(e)(3)(vi)-(ix) of the [ESG Interim Rule](#), "At a minimum, these written standards [that states, counties, and cities administering ESG grants must develop] must include: (vi) Policies and procedures for determining and prioritizing which eligible families and individuals will receive ... rapid rehousing assistance; (vii) Standards for determining what percentage or amount of rent and utilities costs each program participant must pay while receiving ... rapid re-housing assistance; (viii) Standards for determining how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time; and (ix) Standards for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the ... rapid re-housing assistance that each program participant may receive, such as the maximum amount of assistance, maximum number of months the program participant receive assistance; or the maximum number of times the program participant may receive assistance."

A provider receiving HUD RRH grants from, say, a CoC, a city, and a state might operate three separate programs that must comply with three sets of written standards.

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<sup>13</sup> §578.87(d) of the [CoC Interim Rule](#) prohibits CoC-funded transitional housing or rapid rehousing programs from assessing a separate program fee (i.e., a fee not related to rent or occupancy).

<sup>14</sup> Although the [CoC Interim Rule](#) defines these parameters as a project-specific written standard, a CoC could establish such a standard for all RRH projects funded through the CoC.

As discussed in [Chapter 12](#) ("Funding and Collaboration: Opportunities and Challenges"), some victim services providers using HUD RRH grants have felt pressured to reduce participant lengths of stay to between 6 and 12 months, and in some cases, to as close to six months as possible, even though the regulatory maximum duration of rental assistance is 24 months. Some of that pressure may be coming from written standards adopted by the state, jurisdiction, or CoC that administers their grant.

HUD regulations prohibit CoC or ESG-funded transitional housing or rapid rehousing programs from assessing a separate program fee (i.e., a fee not related to rent or occupancy).

Apart from the standard 24-month limit on assistance<sup>15</sup>, OVW TH grants do not constrain the level of assistance that may be provided to a participant, or the amount that participant may be asked to pay.

Both OVW and HUD-funded TH programs (including HUD RRH grant-funded programs) can serve eligible participants, regardless of immigration status. In fact, the [OVW's annual solicitation for TH grant proposals](#) warns that applications proposing "Activities that Compromise Victim Safety and Recovery," such as "procedures or policies that **exclude** victims from receiving safe shelter, advocacy services, counseling, and other assistance based on their actual or perceived age, **immigration status**, race, religion, sexual orientation, gender identity, mental health condition, physical health condition, criminal record, work in the sex industry, or the age and/or gender of their children" may be penalized or eliminated from consideration. (pp. 8-9)

An [August 5, 2016 letter](#), jointly released by the U.S. Department of Justice, U.S. Department of Health and Human Services, and U.S. Department of Housing and Urban Development (HUD) similarly affirmed to OVW-, HUD-, and FVPSA-funded providers that mainstream emergency and domestic violence shelters, **OVW- and HUD-funded TH programs, and HUD-funded Rapid Rehousing programs, may all provide emergency housing assistance to undocumented immigrants.**<sup>16</sup>

As noted above, all participants in HUD-funded programs must have a lease or occupancy agreement, depending on the program model. Almost every OVW-funded provider that used a scattered-site housing model and that discussed their arrangements with participants indicated that they, too, required participants to sign a lease or occupancy agreement. There was more variation among OVW-funded providers that operated congregate programs. [Correia & Melbin \(2005\)](#) notes that,

*"Leases often serve to protect both the participant and the program, and provide some legal recourse in the event of eviction or damage to the unit. Programs also cite these policies as one way to assist participants in transitioning into permanent housing, by mimicking the rules and financial requirements of*

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<sup>15</sup> Section (c)(2) of [42 USC §13975](#), the federal statute authorizing the OVW TH program, allows for waivers to permit six more months of assistance for participants whose "good-faith effort to acquire permanent housing," has fallen short.

<sup>16</sup> An [August 11, 2016 news release on the HUD website](#), summarized the message, as follows:

*"Today, the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Health and Human Services (HHS), and the U.S. Department of Justice (DOJ) issued a joint letter reminding recipients of federal funds how the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 applies to their programs.*

*Through PRWORA, Congress restricted immigrant access to certain federal public benefits but also recognized exceptions to protect life or safety. Congress authorized the Attorney General to identify programs, services, and assistance that meet specific criteria for which immigrants remained eligible regardless of immigration status.*

***The purpose of this letter is to remind housing and service providers that they must not turn away immigrants experiencing homelessness or victims of domestic violence or human trafficking, on the basis of their immigration status, from certain housing and services necessary for life or safety – such as street outreach, emergency shelter, and short-term housing assistance including transitional housing and rapid re-housing funded through the Emergency Solutions Grants (ESG) and Continuum of Care (CoC) Programs.***

*The letter from the Attorney General and the Secretaries of HHS and HUD, dated August 5, 2016, is not a new policy. It reiterates existing laws and policies and applies those policies to programs that were not in effect when the original Attorney General Order was signed in 2001."*

*living in mainstream housing.... Whether or not a formal lease is in place, transitional housing projects for domestic violence victims usually operate with some type of rental or financial payment schedule.... Programs must be clear about their policies around rent collection and payment, to minimize legal confusion and loopholes...." (p.10)*

**(d) Approaches to Providing Survivors with Financial Assistance for Program Housing-Related Costs**

Nearly all of the providers we interviewed took one of four approaches to assisting with the cost of rent and/or utilities (in addition, typically, to helping out with some combination of first month's rent, last month's rent, security deposit, and moving expenses, if any):

- **Charging a flat rate for housing, to be paid regardless of tenant income** (e.g., \$25.00 a month). As [Correia & Melbin \(2005\)](#) observed, "this method streamlines the rent collection and paperwork process, but may be inequitable if participants' incomes vary greatly." Another benefit to this approach is that it makes budgeting easier for participants, and typically leaves more money for other expenses than other rental assistance strategies. However, it leaves participants vulnerable to "sticker shock" when rental assistance ends and they are faced with market rate rents.
- **Requiring participants to pay an increasing share of the rent over time.** For example, a provider might cover the full cost of housing for the first few months, then cover 75% of the cost for a few months, then 50%, then 25%, and then terminate financial assistance. Different providers take different approaches to phasing down assistance, depending on the allowed maximum stay and the amount of funding available. Many providers indicated they had the flexibility to extend financial assistance if necessary. Variations on this theme included separately phasing in tenant responsibility for rent versus utilities; or phasing down the amount of assistance to the point that the participant was paying 30% of their adjusted net income (the same amount they would pay with a Section 8/Housing Choice Voucher), rather than ever reaching to point where a participant would be required to pay the full cost of rent and utilities.
- **Requiring participants to pay 30% of their adjusted net income for rent/utilities**, as soon as they become responsible for housing costs. This approach would prepare a participant for the cost of a subsidized apartment, but if she were not lucky enough to obtain public or subsidized housing, it could leave her unprepared for the cost of market rate housing. Of course, if a survivor's income is low enough, paying even 30% of their income for housing could leave them unable to meet other essential expenses.
- **Providing full assistance with rent/utilities for a few months, and then shifting full financial responsibility to the participant.** This approach allows a participant to put aside money at the outset, which will hopefully allow them to survive any rough spots later on.

[Correia & Melbin \(2005\)](#) also note that,

*"Some programs choose to set aside a portion of the monthly rent into an individual savings or escrow account for the participant, to be paid back upon exiting the program. Such an account can help the participant successfully transition into permanent housing when funds are needed for expenses such as a security deposit or mortgage. While this policy can prove very beneficial to participants, it can also be complicated for programs and should only be implemented after careful and thoughtful planning. For example, some programs face a dilemma if a participant is terminated from the program for illegal behavior. Does that participant still receive her rental set-aside? And if not, what legitimate and ethical ways can the program use the money? Further, does the program have the authority to determine how the rental set-aside will be used? How will a program deal with a situation in which a participant wants to use the money to purchase new clothes or a television set...?" (p.11)*

In discussing the temporary nature of the housing assistance under a HUD rapid rehousing grant (or an OVW TH grant funding a transition-in-place housing arrangement), [Baker et al. \(2010\)](#) observes that,

*"Because the goal of temporary rental subsidy programs is to give women the opportunity to find a place that they can eventually afford and for which they will only need rental assistance temporarily, these programs are sometimes identified as permanent housing programs. However, there is no guarantee that after a specified time of rent assistance women will be able to pay their own rent or that the program will continue payments as long as needed. Therefore, as we move from discussion of transitional housing to a look at permanent housing, the distinction we make is that permanent housing is permanently, rather than temporarily, subsidized." (p.433)<sup>17</sup>*

### **(e) Trends and Implications**

[Baker et al. \(2010\)](#) also observe that "Among domestic violence providers, there is growing evidence of an increased difficulty that domestic violence survivors face in obtaining housing post-shelter." (p.436)

Indeed, almost every provider we interviewed for this project reported that the cost of renting an appropriate apartment was becoming more and more unaffordable for program participants. Their comments echo the findings of the National Low Income Housing Coalition in its annual update of [Out of Reach](#).<sup>18</sup> As housing rental costs rise, the same challenges that thwart "graduates" of old-style transitional housing programs -- finding decent, safe, affordable housing that they can transition to once their temporary program housing is no longer available to them -- also threatens to jeopardize the very premises of the rapid rehousing model:

- If it takes months to find housing that participants will be able to afford when grant-funded temporary financial assistance ends, survivors will spend more time in shelter (or other interim housing<sup>19</sup>), and will need to invest more energy in the housing search process (or forego a role in choosing their housing). Putting that kind of pressure on women who have just fled an abusive situation -- and requiring them to spend more time in shelter looking for housing -- is what rapid rehousing was supposed to help avoid.<sup>20</sup>
- If participants cannot afford to stay in the rapid rehousing units after grant-funded temporary financial assistance ends, then they face the same pressures as they would have in old-style transitional programs, where the housing is temporary. The longer term the assistance, the more time survivors have to increase their skills and employability, and the better prepared they become to pay for housing. But the longer term the support, the more expensive, and the fewer survivors a program can serve. And as HUD and the communities it funds seek to stretch their program dollars further, the transitional housing and rapid rehousing programs they fund are feeling increasing pressure to shorten lengths of stay.

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<sup>17</sup> The preliminary findings of the [HUD-funded Family Options Study](#) -- looking at the status of families 20 months after their (mostly, but not entirely) random assignment from shelter to either "Usual Care" (the trajectory a family in shelter would follow without prioritized assignment to one of the other interventions) vs. "Community-Based Rapid Rehousing" (short term subsidy assistance plus case management) vs. "Project Based Transitional Housing" (congregate or other site-based temporary housing with services, i.e., NOT including transition-in-place programs) vs. Permanent Subsidized Housing (a subsidy, but no special services) -- found that families awarded a permanent housing subsidy showed much greater improvement in housing stability and avoidance of future homelessness, and experienced less intimate partner violence, as compared with any of the other interventions. (See Exhibit ES-5 on p. xxv of the Executive Summary.)

<sup>18</sup> As reported in the [2015 edition of Out of Reach](#),

*"The 2015 Housing Wage is \$19.35 for a two-bedroom unit, and \$15.50 for a one-bedroom unit. The Housing Wage for a two-bedroom unit is more than 2.5 times the federal minimum wage, and \$4 more than the estimated average wage of \$15.16 earned by renters nationwide. The Housing Wage is an estimate of the full time hourly wage that a household must earn to afford a decent apartment at HUD's estimated Fair Market Rent (FMR), while spending no more than 30% of income on housing costs. The data in Out of Reach illustrate the gap between wages and rents across the country." (p.1)*

<sup>19</sup> See [Zerger et al. \(2014\)](#) about the need for interim housing while search for a housing first placement.

<sup>20</sup> HUD's Rapid Rehousing Brief suggests that "Efficient programs typically re-house households in **a couple weeks and in most cases in less than 30 days**," and that a program's approach may "need to be streamlined," if it takes longer. (p.5)

As discussed in [Chapter 6](#) ("Length of Stay"), [Chapter 10](#) ("Challenges and Approaches to Obtaining Housing and Financial Stability"), and [Chapter 12](#) ("Funding and Collaboration: Opportunities and Challenges"), those pressures are also raising grave concerns among the providers we interviewed.

### **What do the VAWA MEI Semi-Annual Reports (a.k.a. Muskie Data) Tell Us about Housing Trends?**

Every six months, OVW-funded TH programs submit data on the housing and services provided and households served. The following is a summary of data about the units of housing assisted by OVW TH grant funds over the 24-month period (7/1/2012 - 6/30/2014) covered by the four relevant report summaries on the [VAWA MEI website](#). (Note that units **not** leased or assisted with OVW grant funds would not be counted in these statistics, even if the survivors residing in these units received services furnished by OVW grant-funded staff. That is, these statistics do not count units leased or financially assisted with funds from HUD, TANF, state agencies, or other sources. An average of 80.4% of projects reported using OVW grant funds to support housing-related costs. As discussed in our provider interviews, many OVW grantees use HUD grants or other funds to lease or provide rental assistance to participants in additional units, whose occupants might or might not be served by OVW grant-funded staff.)

Over the period 7/1/2012 - 6/30/2014 -- of all the units of housing financially assisted by OVW TH grant funding:

- 65.1% of the units financially assisted by OVW grant funding were **scattered-site**. **80.8% of those scattered-site units were leased by the participant**, with the program providing rental/voucher assistance. 14.6% of the scattered-site units were leased by the program, and 4.6% were owned by the provider.
- 27% of the units financially assisted by OVW grant funding were **clustered**. (Note that the VAWA MEI definition of clustered includes both self-contained apartments and congregate units that are not co-located in the same building or property as a shelter.) 61.4% of the clustered units were owned by the provider, 22.5% were leased by the program, and 16.1% were leased by the participant, with the program providing rental/voucher assistance.
- 7.9% of the units financially assisted by OVW grant funding were **co-located with a shelter**; some of these units might have been self-contained apartments and others might have been congregate units (i.e., with some shared living spaces). 84.3% of these units were provider-owned and 15.7% were leased by the program. (None were leased by participants.)
- Over the four reporting periods, the number of units funded by OVW grants has steadily increased, from 1,253 to 1,307 to 1,381 to 1,464. **Increases in the number of scattered-site units have accounted for about 90% of the overall increase in the number of units funded by OVW grants**. The number of clustered units has gone up and down, and is essentially unchanged over that period. The number of co-located units has also increased over that period, accounting for the remaining 10% of the overall increase.
- Over the four reporting periods, the number and percentage of OVW-assisted units that are **participant-leased** has steadily increased from 655 (52.3%) to 727 (55.6%) to 778 (56.3%) to 917 (62.6%).
- Over that period, the number and percentage of **provider-leased** units has steadily decreased from 273 (21.8%) to 249 (19.1%) to 204 (14.8%) to 183 (12.5%). Meanwhile, the number and percentage of provider-owned units has fluctuated from 325 (25.9%) to 331 (25.3%) to 399 (28.9%) to 364 (24.9%).

In part because different TH program models come with different strengths and challenges and funder requirements, and in part because of the unique circumstances surrounding the creation and evolution of each TH program -- including opportunities to acquire or develop or receive gifts of property -- providers with access to the necessary resources often operate multiple programs utilizing different approaches and funding.

The following subsection presents providers' brief descriptions of their approaches to program housing -- some involving straightforward implementations of one or another of the archetypal models (e.g., congregate housing, clustered housing, and scattered-site housing), some involving unique hybrid approaches, and some involving implementation of several different models, using multiple sources of funding, and hopefully affording survivors at least one option that matches their needs and circumstances. As is evident from the comments which follow, there is significant variation in the size and format of their TH programs.

**(f) Provider Comments Describing Their Approaches to Program Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) We have a 20 bed program which typically serves six or seven families plus 1-2 individual women. Participants are housed in a 3-unit apartment building and an adjacent single-family house.

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(#02) Our transitional program houses six families and four single women. The families are housed in two scattered-site apartments we lease from a management company and four apartments in a building we own. The building we own also includes a 4-BR apartment that communally houses the four single women.

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(#03) We have a scattered-site transition-in-place program serving six families and/or individuals at a time. Program participants lease their apartments from community landlords. We pay a stipend to participants that covers a portion of the rent, and the participant pays the rent. If anything happened to our grant, they would still be in their own apartment. This way they're more empowered.

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(#04) Our agency operates both site-based transitional housing (TH) and transition-in-place, rapid rehousing. We have six units of TH for survivors in a building we own, and 12 units in property owned by a partner agency; we mostly serve families, but occasionally serve individual survivors. Everyone has their own unit, which includes their bedrooms, bathroom, and kitchen. It's their apartment; they have a key. We have 11-15 units of rapid rehousing scattered throughout the county for survivor families and another 24 units of rapid rehousing for single homeless women who may or may not be DV survivors.

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(#05) In the last year our Housing Authority had closed their wait list, so there weren't vouchers going out into the community. We worked with the governor's office and the state coalition to advocate for funds for housing for survivors, and we designed a special voucher program with them. We're very pleased that we were able to get the state to allocate funding to this new program creating three-year vouchers specifically for victims of domestic violence, stalking, sexual assault, and dating violence. There are now 115 transitional housing vouchers that will place someone into an apartment with the goal that at the end of the three years they will either receive a Section 8 (i.e., by moving up the wait list) or have the income to support themselves.

We are the referral source for that program and are in charge of that wait list. It still goes through the Housing Authority but we can help participants with the paperwork, and as long as they meet the requirements we can prioritize them. It's a new program, and we want it to be successful, so we try to put people in who seem ready to be independently housed. Some people in our shelter-based transitional program need a high level of support, or on-site support, and we won't move them out because they may not be successful and may lose the voucher, so we wait until they want it and are ready.

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(#06) We have a 30-year agreement to rent an apartment building from a nonprofit agency. Eight of the 18 units are for our transitional program; the other 10 units are for our permanent supportive housing program.

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(#07) We are a statewide DV coalition with 15 member programs. We have an OVW transitional housing grant that we use to manage 26 units of housing at three locations, where we place survivors. That is, we decide who gets to live in them, and we're responsible for the maintenance and repairs. We built those 26 units in partnership with a low income housing developer using tax credits from our state housing finance agency.

They're actually owned by an entity that was formed to use the tax credits. There are eight units (four duplexes) at one site, 12 units (six duplexes) at another site, and six units (two triplexes) at the third site.

With our OVW grant, we also provide rental assistance and supportive services to at least 14 other survivors who live in units that they lease from private landlords. We help them find those units.

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(#08) Our OVW transitional housing grant funds a scattered-site transition-in-place program that, on average, serves 15 women at a time, half of whom are individuals with no children, and half are families with children. Our agency also operates two non-OVW-funded homes that survivors can transition into: one is a short term residence- three-to-six months, and the other is up to two years. One house was given to us through the Federal Neighborhood Re-stabilization Program. If the women staying there pay their rent -- 30% of their net income -- the house can sustain itself, because there's no mortgage and the expenses are so low. The other house is supported with state funds dedicated to addressing homelessness.

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(#09) We lease a single family dwelling, which we call our transitional shelter, where we can transitionally house 3-4 families, and we use the OVW grant to fund transitional rental assistance to three families in participant-selected scattered-site units. Participants have to move out of the single family dwelling at the end of the program, but can transition-in-place in the scattered-site units, once their stay in our program ends.

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(#10) We have 21 units in two different sites. The first site is an apartment complex that we own, which has 10 clustered units. Participants pay some rent, and pay for heat and utilities. Two of the units have project-based subsidies and a few of the participants in the other units have their own Section 8 vouchers. We pay for the water and garbage. Program participants are also housed in 11 scattered-site town home units in a different city. Those units are owned by a non-profit affordable housing landlord. We provide the services, and the units are dedicated to our program. Some participants pay 30% of their income towards rent, and some pay about \$700; the amount of their rent depends on how the unit was financed. The non-profit landlord pays for everything else: water, garbage, heat, utilities. Residents hold the leases in both sites.

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(#11) We have six units on site that we operate as a more traditional transitional housing project, where people can stay from six months to two years. Our building was partially funded by low income housing tax credits, and we have a long-term lease from the state for a dollar a year. So there's sort of a back-end subsidy which allows us to keep the rents on those six apartments artificially low, so participants can pay a below-market-rate rent. A HUD transitional housing grant pays for the services. That program can serve both individuals and families. Each participant household has a fully equipped 1BR apartment. When there are families, we install a pull-out sofa.

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(#12) We have 21 units clustered in an apartment complex, so we can serve 21 individuals or families at any point in time. We have nine efficiencies but we sometimes have women that also have children that stay in those efficiencies. Every household has its own kitchen, bathroom, washer and dryer, and living space. Everything is completely separate. Their rent is based on their income. If they stay the full term of the lease, that would be 24 months. But they need to secure other permanent housing.

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(#13) Our program has fifteen units all for small families. The apartments are clustered in a single development, with five buildings that share a courtyard. Each family lives in a separate unit and the targeted length of stay is 18 months. When families complete the program, they have to move out.

We also operate a rapid rehousing-type program which provides up to two years of rental assistance and case management. Participants rent their apartments from mainstream landlords and contribute 30% of their adjusted income for housing. Participants are expected to be able to assume the entire responsibility for their housing costs by the time the assistance ends. Most of the time, people transition-in-place in their units, and the case-management ends after the two years - or sooner, if the client no longer needs the services.

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(#14) Our transitional living house is like a two-family duplex: each side of the house has a 2BR apartment and three 1BR apartments, so altogether, we have 10 bedrooms and 15 beds, and can house 15-17 women and children, depending on the makeup of the families. In addition, we have three scattered-site units, each of which can house a single adult or a family. We own the house; we don't own the scattered-site units. For the scattered-sites we provide the rental subsidy and case management. So participants negotiate their own lease, we work with them to find an apartment in the community, the utilities and all of that stuff is set up in the client's name, they pay 30% of their income towards their rent and then we pay the rest of the rent.

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(#15) We have 11 units for women with children in a building we own. Participants can stay for up to two years, and then they have to find other housing. Finding other, more permanent housing is a main goal while they are in the program. Since they all get Section 8 vouchers, they get a chance to choose where they want to live. Typically when the women enter the emergency shelter, the family advocate or program manager gets them on the Section 8 waiting list. Typically when you're homeless, you're moved toward the top of the list. Once they get their voucher, they have 120 days to use it or lose it, so they have to really hustle to find housing. We've served women who could maybe have left after six months or a year, but stay for two years waiting for a subsidy because that subsidy is their only option for rent based on their income.

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(#16) We usually average about 20 participants. The vast majority of our transitional units are scattered-site. Individuals find their own apartments, and we enter into a written agreement with their landlord on what we will pay, etc. Our agency also has two homes that we built, and we're in the process of fundraising to develop an additional seven homes; each of which will house one family. We will eventually have four 2BR homes and five 4BR homes. Participants living in our properties will have to find their own housing when they complete the program; participants in our scattered-site units can transition-in-place. We cover their full rent for the first three months, so they can have some time to get on their feet; then, their contribution increases by 10% of the rent every two months throughout the two years. They may transition before the two years, if they've been able to gain employment and are able to manage their rent and everything on their own -- or if they're able to transition to Section 8; getting them on the waitlist is usually the first thing the shelter case worker does, so by the time they're at the end of our program if not sooner, they're near the top of the list.

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(#17) In addition to our scattered-site programs, we're fortunate to have two houses where we can house families for six months. A local church owned the properties, but they were a lot to maintain and they wanted to help the community, so they rented each of them to us for a dollar a month. The OVW grant pays for the utilities in these houses. The criteria for staying in these houses are very flexible. We charge \$150/month to the client, and at the end of their six month stay, they get all their money back, to help with the deposit on their next place. It's an additional six months during which the women can plan, work on employment, and do what they need to do to get ready for housing. The \$150 is a tiny amount for the women, so we can take someone that doesn't have much income and that just needs housing for a few more months to get a job and put some money in the bank.

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(#18) We have several different transitional housing programs: (1) We own a 40-unit complex on our campus. We dedicate one of the units to a live-in resident manager who provides onsite support. So we have 39

participant units that range from efficiencies to 3BR units; most are 2BR units. Our onsite program is a HUD-funded legacy SHP transitional housing program. (2) We have a newer OVW- funded program that provides six 1BR and 2BR units of scattered-site transition-in-place housing, primarily for families. The landlord is a local affordable housing non-profit. The participant is the leaseholder while they are in the program, but the program pays the rent. (3) We have five units of scattered-site housing that are unfunded, but have been donated as rent-free units by the owners. How it works is the owners make a cash donation to our agency in the amount of the rent; they lease the units to our agency and we pay the rent (in the amount of their donation). We sublease the units to our transitional housing residents on a cost-free basis.

***Our 40-unit on-campus complex*** has a 20-year use requirement as a legacy of the HUD funding that we used to help pay for the complex. I think we're past 15 years at this point, but we have no intention to stop using it for its intended purpose. We are the landlord as well as the service provider. Participants make the standard HUD participant contribution to rent - the higher of 10% of gross income or 30% of adjusted gross, except that we cap their rents at \$250 for an efficiency, \$300 for a one-bedroom, \$350 for a two-bedroom, and \$400 for a three-bedroom. Of course, these contributions don't cover the full cost of maintaining the housing; however, our Continuum of Care grant funding covers a high percentage of our operations-related costs, and our project has continued to be highly prioritized because our outcomes are very good.

***Our OVW-funded program*** provides a year of transitional housing, and covers the cost of participants' rent. Participants are responsible for all their other expenses: utilities, food, and household needs. Participants have full access to supportive services if they need and want them through our agency and through the partner agency onsite at the program. Housing in our community is quite expensive, so even in an affordable housing complex, we're in the \$600 range for the 1BR units, and the \$700 range for the 2BR units. Our residents know they have the opportunity to stay in their same unit, but they have to meet the landlord's income requirement and apply directly to that landlord. The landlord gets to apply their standard screening criteria, and their criminal history screening is much stricter than what we use for our onsite program. So that is one possible barrier. So far, close to half of our residents have been able to transition-in-place.

***The five units donated by the landlords*** are time-limited because they are leased to our agency. So the residents are not on the lease. Again, it's on a six-months-at-a-time basis, with an option for one renewal. Survivors that go through that program have the opportunity to apply to transition-in-place. While they are in the unit, they have the opportunity to demonstrate to the landlord that they can be a good tenant. And if they've already made it through the initial screening process and been accepted as a program participant, that can facilitate an easier transition to their own tenancy at the end of their program year. They might have to move into another property owned by that landlord, however. Two of the units at one location offer a special appeals process around criminal history and credit. They're actually part of a tax credit property, and we have had residents stay on their waiting list for the most heavily discounted tax credit units and be able to transition-in-place. At the other location, the landlord maintains a screening process around criminal and housing history that's similar to the OVW-funded units, so we consider all of that in our referral process.

It's wonderful to have a range of options, because transitional housing really isn't a one-size-fits-all-approach. There's a strong push in the homeless services world now towards permanent housing, which is something I really agree with. But transitional housing does meet a lot of the unique needs of survivors of domestic and sexual violence who may still be coping with batterer-related barriers and risks and may need to move around quite a bit, depending on what happens. So having the flexibility to offer congregate housing or a lease that they can get out of without a penalty is important, and having a connection to optional support services and rental assistance can help during that ongoing process of assessing how the risks are changing, what is helping to enhance safety and what may not be working well, and trying to adjust plan for more permanent safety and stability. Different models are successful with different people. We've tried to develop fairly effective screening tools to know what someone might be eligible for. We especially value our ability to offer clients as much choice as possible -- What are you looking for? Where do you want to go? How can we help you get

there? Of course, resources are limited, and we don't have enough transitional and scattered-site permanent housing to meet the needs of all the folks we're serving in our shelter at any time.

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(#19) We have two transitional housing programs that use two different models. We have a largely OVW-funded program based in an agency-owned apartment building with six clustered units. Because we own the building, we don't pay ourselves rent, but the clients pay a fee, based on a sliding scale. Clients have stayed there as long as 18 months, and a waiver can be approved if people need a little longer. If they need more time, we can explore moving them to our state- and county-funded scattered-site program, to finish their last year. Sometimes they want to move to a different municipality; they want their children to start school there. So they may stay at our clustered program for a few months and then be in the scattered-site for a year.

The scattered-site, transition-in-place program serves five families. Typically the client finds the apartment in the municipality where they want to live, or we do it together. Our agency signs the lease and pays for their rent and utilities in full. Clients pay an occupancy fee to the agency based on the same sliding scale as our other program. If the client is in a position to take over the lease when the program ends, they can transition-in-place. In a couple cases, after a period of time, we've given the client the option of making their payment directly to the landlord, so that the landlord sees the rent money coming from the participant, and so she can start to build a trusting relationship with that landlord. The last four times we tried that strategy, the landlord signed a lease with the participant without checking their credit. So it's really worked out. One property owner, who has several different apartment complexes in our county, even offers a slightly reduced rent when the lease transitioned to one of our clients. The scattered-site program doesn't use any OVW funding.

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(#20) Usually our older participants have a fixed income. Some of these women don't have their own income and have been very dependent on their husband, and maybe never worked outside of the home. So the whole financial piece is complicated and it takes time and a lot of paperwork to get them their own Social Security income and figure out what they can afford for housing. Generally, they can only afford subsidized housing. So we talk with the housing authorities, try to find out which of their buildings give priority for DV survivors. Sometimes with senior housing, the subsidy goes with the building. So if you qualify financially to live there, they will accept 30% of your income for rent, whatever your income is. We have done a lot of work building relationships with the landlords. So sometimes it's just a matter of saying, "I've got this person and she's in a really tough spot," and we can get somebody to the top of a waiting list for housing.

We don't have money in our grants that we can use to pay rent -- but usually we don't have to because we're finding subsidized apartments that they can afford on their income.

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(#21) We have traditionally called our housing transitional because originally we received funding through HUD and the Continuum of Care. But we've always used a rapid rehousing/transition-in-place model. We have set-aside units within low income housing tax credit properties and our participants are able to access those set-asides but when they're stable and able to maintain their unit on their own, then we access the next available unit within that complex. This model has been effective because we don't have the extra cost in shifting people but also because people can establish tenancies in below-market-rate apartments, and establish themselves in neighborhoods and in relationships, and the kids stay in the same schools. Friendships can be developed and there's a sense of community right from the beginning. It has worked well for us.

We started with five set-aside units within a 66 unit complex and then we added another five units within another 66 unit complex and another five units in the next year within another complex. And, as needed, we've placed people in scattered units in other locations. We serve a very rural five-county area; people come to our program from not only this geographical area, but from outside of this immediate community, as well. Not all the properties that participants move into are tax credit properties; in some really rural areas, there's

no such option, there's no public housing authority, and there isn't government assisted housing. We make the best of whatever we or the participants can find that's suitable and affordable.

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(#22) We have nine units -- three triplexes (seven 2BR and two 3BR apartments) -- clustered on property we own. A donor purchased the land and we used funds from a housing grant to pay him back. We then used private foundation funding, a CDBG grant, a HOME grant, and a Continuum of Care grant to fund construction of our facility, so that we only had a small \$250,000 mortgage. We do a lot of fundraising to pay our monthly mortgage, and hope to someday pay it off. While they're in our program, the families pay the standard 30% of adjusted net income. The property also houses our offices, resource space, childcare space, and shelter.

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(#23) (Not a current OVW grantee) We probably serve around 55 to 60 families at a time in a combination of different housing types. It's all scattered-site. There's one housing complex where we own six of the units. It's a big complex, so it's not like anyone would know that they're homeless just because they live in that complex. Roughly 40 out of that 60 are pure transitional housing, in that a family comes in, stays with us for a period of time with the intent of moving out, in housing that we own or that we rent from another landlord. The other 15-20 participants are in transition-in-place units, or in a few cases, HUD-funded permanent supported housing for families with a disability that prohibits the adult from working and being able to adequately to support the family .

Only roughly 25% of our entire budget is paid for by any kind of government grant. That means, for example, that we have that flexibility to be on a lease for a while and then let the family take over lease when they're ready, which is something we can't do with a HUD grant. As a matter of fact, we can't use any of our agency-owned units under the HUD grant. They have to be all rented. HUD has so many restrictions that it's not very easy to work with. We own roughly 60% of our units and rent the other 40% from private landlords. An advantage to renting is that someone else is handling the maintenance; on the other hand, if you own, the total overall cost might be cheaper, and we don't mind working with people with bad credit or felony histories that private landlords prefer to avoid. I like having a combination of rental and ownership units. If I were to double our size, I think it would be nice to acquire more units and to rent more units.

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(#24) (Not a current OVW grantee) We have three different types of transitional housing: a program that's co-located in our shelter with a two-year limit, a scattered-site program with a three-year limit, and a building-based program that's technically permanent supportive housing with no time limit. We use a housing barriers worksheet and, while that's not the gospel, it helps us think through what might be the best placement for someone, so we don't set them up for failure. We were gifted with the 51,000 sq. ft. building, which houses our shelter, the seven units of co-located transitional housing, our offices, and our PSH units. Each unit in the building is a little 400 sq. ft. apartment with its own bathroom, sitting room, bedroom, and small kitchenette.

We have a cool program we worked out with our state housing finance agency. They created a voucher specifically for victims of domestic violence or sexual assault. People can come through our shelter and we can get them a voucher pretty quickly. It gives them subsidized housing for three years and then the goal is to not need subsidized housing by the time your three years are up. I've shied away from HUD rapid rehousing, because I feel the two year time limit is too short for what has been years and years of abuse.

Different models work for different people; it depends on where folks are, what their needs are. That's why we decided to do multiple types of housing. I think the fact that everyone comes through the shelter has helped with the scattered-site program, because everyone has already bonded with someone on the staff.

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(#25) We've been providing housing first services for years, starting on a small scale and then expanding when we found how successfully it was helping survivors get stabilized and have a good foundation that left them

less vulnerable to returning to the abuser because of poverty and homelessness. Back when we started, we could get folks established in less than a week in new housing. Now it takes a lot longer, and sometimes -- if they're facing considerable barriers to housing, with a history of evictions, etc. -- folks can be looking a couple of months before they find a place. Most situations are probably less than one month, but obviously they do need to have a safe place to stay while they're waiting to acquire housing and so we work with them while they may still be in shelter or temporarily housed in a motel or other temporary kind of situation.

The metropolitan area here has an overall apartment vacancy rate of less than a 2%. The situation is even more dire when it comes to affordable housing, so we're definitely one of those communities that are in an affordable housing crisis. We're looking to find more flexible dollars so we can do rent buy-downs and make some housing that's currently not affordable, affordable to people -- because we just don't have the units we need to move folks in. In the meantime, there are definitely situations that our resources don't allow us to respond to. When we take on a client, we really have to look at, "Are we going to be able to get you into housing?" And, "Within the period of time where we're going to need to pull the rent assistance back, are you going to be able to have income that allows you to sustain that housing?"

There are other things we have tried to devise as a system; there are a number of recovery houses based on the Oxford house model where people throw in together and there's an internal "We govern ourselves," kind of model and you get a private bedroom but there is shared space. It's usually much lower cost than trying to get your own housing. That can sometimes be an option for folks who are never going to have the kind of income that allows them to rent their own place. Sometimes shared housing that's not based on the Oxford model is also a cost effective option. We've even been able to use government funds to support placements in these shared situations, as long as we get something in writing to verify the participation agreement.

### **3. Temporary / Time-Limited Housing versus Transition-in-Place Housing**

#### **(a) Overview: Attributes of Temporary/Time-Limited Housing versus Transition-in-Place Housing**

##### ***(i) Differences in Housing Configuration: Congregate vs. Clustered versus Scattered-site***

One of the most important characteristics of a TH program is whether the housing where participants stay while they are in the program is temporary (i.e., so that participants have to move when their stay in the program ends), or whether their program housing is permanent (i.e., so that participants have the option of "transitioning in place," that is remaining in that housing after their program participation ends. As described below, transition-in-place housing usually, but not always, occurs in a scattered-site setting.

- Clustered housing is ***usually temporary, but in a few cases may offer a transition-in-place option***. Typically, providers utilize clustered housing because it simplifies the logistics of transitional housing without the complications engendered by congregate living (i.e., the interpersonal conflicts that arise when people with different lifestyles, habits, and personalities live communally). Because providers can only enroll the next participant when one of the clustered units is vacated, the sustainability of the model depends on participant turnover, and hence the temporary nature of the housing. The one exception is programs that occupy a relatively small number of units in a larger apartment building or complex: if the larger complex has enough units to ensure periodic turnover of non-program tenants, participants can transition-in-place, and the program can simply place the next participant in the next vacant unit.
- Scattered-site housing ***most often, but not always, provides a transition-in-place option***. Occasionally, providers will lease scattered-site units and make them available on a temporary basis. A transition-in-place unit can start off as a participant-leased unit or it can start off as a provider-leased unit in which the participant takes over the lease mid-program or as the program is ending. (As noted earlier in this chapter, HUD Rapid Rehousing grants require that the participant be the leaseholder from the beginning

to the end of their stay in the program. However, the lease on an OVW TH grant-funded apartment may transition from the provider agency to the TH program participant at any point during the tenancy.

- Congregate housing -- typically in a provider-owned or provider-leased building or apartment -- is **almost always temporary**. The only exception mentioned during an interview was a program that provided time-limited rental assistance to enable participants to transition to [Oxford-type houses](#) which offer permanent, sober, community-style living.<sup>21</sup>

### ***(ii) Differences in Timing and Focus***

Rental assistance in a **transition-in-place** program is time-limited, so, in addition to the other areas of focus (e.g., safety, health and mental health, legal, child-focused, etc., depending on the participant's needs and priorities), **one of the most important areas of advocacy or case management is supporting participants in devising and implementing strategies for sustaining their housing**, for example, helping participants secure a permanent subsidy, strengthen their employability, enhance their budgeting skills and financial literacy, etc.

In some cases, transition-in-place program participants will have found their own housing, while they were staying in shelter or with a friend or family member; in some cases, they will have received help from housing placement specialists or other staff from the shelter or the TH program; and in some cases, those staff will have taken the lead in identifying possible housing options. Timing is important. A survivor can't just move into new housing and hope that she will get Rapid Rehousing assistance; **she must apply for transition-in-place (or Rapid Rehousing) assistance while she is still technically "homeless" or "fleeing."** If she doesn't, then once she is in her new apartment, she will no longer be deemed "homeless" or "fleeing," and will be ineligible for such assistance. Several providers raised concerns about their inability to help resourceful survivors who have engineered their own transition, without knowing the "rules" for accessing assistance.

By contrast, in a TH program in which participants stay in **temporary, time-limited housing**, a participant's stay in the program **ends** -- or enters the "follow-up" phase of the program -- when the participant transitions to permanent housing. So, in addition to addressing other participant needs and priorities, **survivors and program staff must be focused on both the search for permanent housing<sup>22,23</sup> and the resources to sustain it (e.g., income, a permanent housing subsidy)**. If a participant has blemishes in her housing history or credit,

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<sup>21</sup> For an example of the Oxford House Model in Clackamas County, OR, see the [Domestic Violence Survivor Housing webpage](#) of the Metropolitan Alliance for Common Good. See also the [Recovery Association Project \(RAP\) website](#).

<sup>22</sup> As discussed by [Davies \(2009\)](#), [Melbin, Jordan, & Smyth's \(2014\)](#), [Thomas, Goodman, & Putnins \(2015\)](#) and others, not all survivors are interested or ready to move on to independent housing, particularly if such a transition entails giving up the roles and relationships that provided meaning in their lives before they fled the abusive relationship. There are difficult tradeoffs to be weighed, and for some women, returning to their community, even if it means putting up with an abusive partner, is their best option. Time in transitional housing may provide valuable respite from that abuse, and an opportunity to address other needs that could not be met while they were in the abusive situation.

<sup>23</sup> If a transition-in-place program participant cannot develop an income that allows them to assume responsibility for the full cost of their housing and utilities by the time the program's rental assistance ends, they would presumably lose her housing -- but that loss of housing would come months after they had "completed" the program. By contrast, a participant in a traditional TH program who was unable to develop an adequate income would likely be unable to find a landlord willing to offer her a lease, and would have to find some other living arrangement (with family, friends, or back with the abusive partner), or transition to a shelter (or another TH program).

A survivor whose poor credit, poor housing history, weak or no employment record, and/or history of incarceration was likely to stand in the way of finding a landlord willing to offer her a lease, even with time-limited rental assistance, would be a poor candidate for HUD Rapid Rehousing assistance, since she would likely require a lot more time to overcome her housing barriers than the "less than 30 days" that HUD expects an "efficient" program to need, in order to house a client household. ([HUD Rapid Rehousing Brief, p.5](#)) That is, programs concerned about meeting the placement- and duration-of-assistance-related expectations of the Continuum of Care or state/county/jurisdiction administering their HUD grant might be reluctant to enroll survivors with "too many" barriers standing in the way of obtaining housing with a lease.

outstanding arrearages with a prior landlord or utility company, poor employment prospects, or other issues that would weaken an application for a tenancy, the program also helps them address those issues.

As explained in Section 2 Part (c), participants in HUD-funded transitional (temporary) housing must have a month-to-month (or longer term) lease or occupancy agreement in their name; participants in a HUD RRH-funded unit must have a lease in their name that is at least one year in duration and renewable (if their unit is CoC-assisted) or at least one month in duration and renewable (if their unit is ESG-funded). OVW TH grants do not include lease-related requirements.

Although when it comes to the emphasis on services and the duration of assistance, there is no intrinsic difference between a TH program that uses temporary, time-limited program housing and a transition-in-place program, the reality, given the funding sources and other logistics is often different:

- Particularly when HUD Rapid Rehousing funding is involved, there is often a presumption that transition-in-place placements are for individuals and families that are ready, or almost ready, for independent living, whereas "traditional" transitional housing is for individuals and families who need more extensive and longer-term assistance. Thus, for example, quite a few providers utilizing HUD RRH grants reported pressure to shorten the term of assistance to between six and twelve months, whereas technically, both OVW and HUD-funded assistance can continue for up to two years.
- The philosophical foundations for that pressure are explained in HUD's [Rapid Rehousing Brief](#):

*"The primary barrier to permanent housing for many families experiencing homelessness is their limited finances. To address this barrier, rapid re-housing programs offer financial assistance to cover move-in costs, deposits, and the rental and/or utility<sup>24</sup> assistance (typically for six months or less) necessary to allow individuals and families to move immediately out of homelessness and stabilize in permanent housing. In some instances, households may need and qualify for longer term rental assistance, such as through a Housing Choice Voucher (i.e., "Section 8"), to permanently escape homelessness and achieve housing stability. In this case the time-limited financial assistance may serve as a bridge until the voucher is secured." (p.3)*

However, with waits for permanent housing subsidies taking years instead of months, the short-term bridge that Rapid Rehousing-funded financial assistance provides becomes inadequate, and survivors hoping to juggle their finances in otherwise-unaffordable housing until they are awarded a subsidy might find themselves facing an eviction for non-payment of rent, thereby damaging their future chances of getting either housing or a subsidy.

## **(b) Relative Advantages and Challenges of Temporary versus Transition-in-Place Housing**

### **(i) For Providers**

- TH Programs that own or lease the units where participants **temporarily** live exercise complete control over the location of participant residences, resulting in a logistically simpler program, with typically lower staff travel-related costs. Transition-in-place programs have less control over where participants live.<sup>25</sup> The further out participants live, the more expensive and time consuming is staff travel.

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<sup>24</sup> Note that while ESG rapid rehousing funds can pay for ongoing utility costs, as well as the initial utility deposit, CoC-funded rapid rehousing grants can only pay for the initial utility deposit. See [HUD Rapid Rehousing: ESG vs. CoC Guide](#)

<sup>25</sup> Both OVW- and HUD- funded programs are funded to serve specific geographic regions (e.g., a state, county, city, or a combination); programs utilizing scattered-site housing may more narrowly define the geography within which in-person services can be provided.

- TH Programs that provide participants with temporary housing avoid having to find a new apartment every time a survivor enters the program. Transition-in-place programs must assist incoming participants in finding suitable housing (unless participants find housing on their own, or get help from shelter staff).
- TH programs that own or lease the units where participants **temporarily** live have all the responsibilities associated with owning or leasing housing. Transition-in-place programs may temporarily have the responsibilities associated with leasing (if the program is not HUD-funded); however, once the lease is in the participant's name and the TH program is simply providing rental assistance, their liability decreases.

**(ii) For Participants**

- Participants in TH programs that provide temporary housing don't typically get to choose the general location or the apartment where they live, and they may be housed in a place that is inconvenient to connecting with the people and activities that matter to them and their children, or that feels unsafe. Participants in transition-in-place programs have more control over where they live, subject to their ability to obtain suitable housing. After being in a controlling relationship, being able to choose where she lives may provide an important psychological or emotional boost for a survivor.

Living in the community where they hope to reside over the long term allows TH program participants (adults and children) to invest in relationships with people and institutions that will benefit them over the long term. By contrast, participants temporarily living in a community that they will likely leave at the end of their program stay are unable to make such investments in their future. Finally, to the extent that they have one less move to navigate, participants in a transition-in-place program are able to enjoy a sense of stability that participants in temporary housing do not have.

- Participants in TH programs that provide temporary housing have more time to address their housing-related barriers (e.g., credit issues, prior evictions and/or lack of landlord references, outstanding rent or utility arrearages, lack of reliable income, etc.) before they must find housing. Participants entering an OVW-funded transition-in-place program might have that same grace period, if the provider is the initial leaseholder. Participants whose housing-related barriers prevented them from being offered a lease would not be good candidates for a HUD-funded transition-in-place program, since HUD requires the participant to be the leaseholder.
- Transition-in-place program participants who have been able to find an apartment (with the help of the provider's assurance to the landlord about rental assistance) don't have to worry about where they are going to live; their housing will be secure if they can develop the income to sustain it over the course of their time in the program. By contrast, participants in temporary housing face increasing pressure, over the course of their stay, to find and secure permanent housing to which they can transition before their time in the TH program runs out. If they haven't developed an adequate income and/or sufficiently addressed the other barriers that stand in the way of finding housing, they may have few, if any, good alternatives to returning to the situation they fled, moving in with family or friends, couch-surfing, or transitioning to shelter or other homeless program.

If, however, their goal was **not** to relocate to more independent housing, if they intend to return to the relationship they fled, and if their stay allowed them respite from the violence and a chance to address other needs, then they may see their experience in the TH program as positive, even if the outcome isn't what the funder might have hoped for.

- As noted earlier, **transition-in-place programs aren't inherently shorter or less service-rich than traditional TH programs utilizing temporary housing owned or leased by the provider.** To the extent that they rely on HUD funding, however, they will have tighter limits on length-of-stay, and survivors can expect to have less time to navigate their transition-in-place than in an entirely OVW-funded transition-in-place program or a traditional TH program utilizing housing owned or leased by the provider.

Although technically, the maximum length of stay in both types of TH program is two years, participants in a HUD-assisted transition-in-place program can probably expect, on average, 6-12 months of assistance, whereas participants in an entirely OVW-funded program (transition-in-place or "traditional") would likely be afforded more time to heal and address their needs and priorities.

### ***(iii) Considerations and Context***

Whether transition-in-place housing or time-limited transitional housing is the best option for a given survivor depends on that survivor's needs, circumstances, and priorities; on the specifics of the TH program, including how it is funded, where it is located, and the staff support and leveraged resources it can make available.

While consideration of these factors might point to different "best alternatives" for different survivors, the realities on the ground -- the actual housing, staffing, funding, and the local economy and housing market that provider agencies have to work with -- constrain survivors and their advocates to a more finite set of options.

Ideally, each provider agency would have a menu of program choices, so that survivors could select the combination of housing and services that best fit their family's needs. As their comments at the end of Section 2 indicated, a number of the providers that we interviewed are able to offer a mix of "traditional" time-limited congregate or clustered housing, as well as scattered-site transition-in-place options. Many other providers lack the resources to offer multiple options, and many communities lack the resources to support multiple providers who can offer complementary options.

In the resource-constrained world where the providers we interviewed operate, ***participants' housing-related barriers*** (e.g., prior evictions, poor credit, outstanding rent or utility arrearages, low/no income and limited earning potential, etc.); ***challenging geography*** (e.g., sprawling rural areas where decent rental housing is scarce, where a car is necessary, and where there are few services); ***difficult market conditions*** (e.g., a highly competitive job market, prevailing wages that are too low to sustain housing and support a family, increasingly expensive rental housing prices, extremely limited supply of decent affordable housing, and long waits for permanent subsidies or subsidized housing); and ***limited program resources*** combine to constrain the options available to survivors.

- If the local housing market -- especially the market for affordable housing -- is highly competitive, and survivors with imperfect housing credentials cannot convince prospective landlords to offer them a lease, then a transition-in-place program that relies on participants securing tenancies in their name isn't a viable option for them. As noted earlier in this chapter, nearly two-thirds of all OVW TH grant-assisted units -- and about 90% of the units added to the OVW TH program over the course of a recent two-year period -- are scattered-site participant-leased units. Increasingly, then, the ability to lease an apartment in their name is a prerequisite for participating in OVW transitional housing. And since all HUD Rapid Rehousing grant-funded units must be leased to the participant, the ability to obtain such a lease is also a prerequisite for participating in any OVW TH program that utilizes HUD-RRH-funded housing.
- If the kinds of jobs survivors can realistically get won't cover their housing costs and other costs of living, and if the wait list for housing subsidies is hopelessly long, then neither a transition-in-place program -- which requires the participant to assume responsibility for her housing-related costs within the allotted time -- or a traditional TH program -- which requires the participant to obtain alternate permanent housing within the allowed length-of-stay period -- can offer a path to safe, sustainable, stable housing.
- A traditional congregate or clustered TH program may afford access to a range of in-house and leveraged supportive services, but may not offer a survivor the proximity to the family, friends, and community institutions she wants to be close to. Conversely, a scattered-site transition-in-place program might allow a survivor the proximity to those people and places, but may not be able to provide convenient access to the supportive services that can facilitate healing, help address the impact on the children of exposure to violence, or enable the education and training that could lead to a better job and more stable income, if those are things she is hoping to get out of the program.

- The longer the term of program assistance, and the more financial assistance offered to each participant, the fewer participants a program can serve, given its finite budget. Providing more extended and extensive support to survivors who are fortunate to be able to access a program, means that other survivors won't have that opportunity; that women and families who fled abuse, and spent the few weeks or months in shelter that they are allowed, will face the difficult choice of prolonged homelessness or housing instability versus returning to their abusive (ex-)partner.

### **(c) Innovations and Trends**

#### ***(i) Evolving HUD Approach***

As noted previously, HUD CoC and ESG grants are a very important source of funding of transitional housing (and Rapid Rehousing/transition-in-place) programs for survivors. HUD and members of the HUD-funded homeless housing and services provider community have been involved in an ongoing debate about the efficacy of traditional TH programs, that is, programs which provide time-limited housing, plus services, at the end of which participants must leave and find alternate housing.

While victim services providers that operate traditional TH programs have argued in favor of preserving that model, HUD has been a strong proponent of Rapid Rehousing, and has encouraged CoCs and their providers to consider phasing out what it sees as more expensive and less efficient traditional TH programs, and using their HUD funds to provide Rapid Rehousing (or permanent supportive housing). Thus, for example, although a [September 2013 HUD posting entitled "What About Transitional Housing?"](#) by then-HUD Deputy Assistant Secretary of Special Needs Ann Oliva identified DV survivors as a population for which "traditional" TH programs are appropriately targeted, her overall message to CoCs was to "consider reallocating funding" from such TH programs to "more promising models" like rapid rehousing and permanent supportive housing.

The July 2015 release of the 20-month update on the HUD-funded [Family Options Study](#) reignited the debate. The study compares the outcomes of homeless families in shelter who were (more or less<sup>26</sup>) randomly assigned to one of four interventions: (i) project-based ("traditional") transitional housing (PBTH)<sup>27</sup> (ii) community-based rapid rehousing program (CBRR), (iii) receipt of a permanent housing subsidy (SUB), and (iv) "usual care" (UC), involving a more extended shelter stay and whatever the next steps might typically be.<sup>28</sup>

Although the study was not specifically about families whose homelessness was precipitated by domestic violence, 49% of adult respondents in the study reported adulthood experience of violence perpetrated by a spouse or partner (although that violence may not have precipitated the episode of homelessness analyzed in the study), supporting other research that links family homelessness and domestic violence. In fact, the study authors observed that the process of selecting programs for the study resulted in an under-representation of survivors in the study population, because (i) some of the originating shelters "would not accept families fleeing domestic violence, because of concerns about their ability to ensure the safety of the families,"<sup>29</sup> and (ii) the study specifically excluded DV shelters, "because most victim-service providers did not believe that random assignment to nonspecialized homeless assistance programs was appropriate for such clients." (p. 41)

The study's preliminary findings -- 18-20 months after placement from shelter -- will only fuel the debate about the relative merits of traditional transitional housing, as compared with Rapid Rehousing:

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<sup>26</sup> Not every community could offer each of the options assessed in the study, and some participants opted out of their assigned program to enroll in a different program.

<sup>27</sup> Not including transition-in-place programs, which were excluded because of their similarity to rapid rehousing

<sup>28</sup> In the absence of any experimental intervention, a family in shelter might "typically" be accepted into a transitional housing or rapid rehousing program, might receive a permanent subsidy, might move in with family or friends, etc.

<sup>29</sup> The study authors posited that this exclusionary policy, "led to lower numbers of families facing domestic violence at baseline than otherwise might have been the case." (p.6)

- "Families assigned to SUB [getting a permanent subsidy] appear to be doing better than the families assigned to CBRR, PBTH, and UC;"
- "Compared to those assigned to UC, the families randomly assigned to SUB on average have had fewer negative experiences (homelessness, child separations, and intimate partner violence<sup>30</sup>);"
- "PBTH is more costly and at this point has few advantages over other programs;" and
- "No evidence suggests that intervention impacts differ according to the families' psychosocial challenges or housing barriers" --

Indeed, HUD Assistant Secretary for Policy Development & Research Katherine O'Regan set the stage for that debate by describing the interim study results as "striking evidence of the power of offering a permanent subsidy to a homeless family. Families who were offered a housing voucher experienced significant reductions in subsequent homelessness, mobility, child separations, adult psychological distress, experiences of intimate partner violence, school mobility among children, and food insecurity at 18 months. Moreover, the benefits of the voucher intervention were achieved at a comparable cost to rapid re-housing and emergency shelter and at a lower cost than transitional housing." (Forward to the [Family Options Study](#); p.iv)

Based, in part, on conclusions it drew from the [Family Options Study](#) about the unfavorable cost/benefit of traditional TH programs, and for a variety of other reasons described in a [FY 2015 CoC Program Competition Recap](#), HUD made the decision in the 2015 CoC funding competition to expand funding for permanent supportive housing (PSH) and Rapid Rehousing (RRH) projects, and cut funding for traditional TH programs by 47.5%, eliminating slots for some 15,000 households. Because the average per-unit cost of PSH and RRH projects is lower, HUD projected a net increase by 5,000 in the number of family households that will be served. Although most of de-funded TH programs did not target survivors of domestic or sexual violence, it is fair to assume that a proportional number of programs operated by victim service providers were among the projects not funded. (The aforementioned [Competition Recap](#) does not provide that level of detail.)

HUD's thinking about Rapid Rehousing, as outlined in its [Rapid Rehousing Brief](#), explains why that funding source can be helpful in enabling some survivors to transition back to the community, but why it may be inadequate -- without additional resources to extend and deepen financial assistance and supportive services -- to help other survivors who have more extensive housing barriers and have been more substantially impacted by their experience of trauma and abuse -- the kinds of survivors that might be better served in more-expensive-to-operate, more service-rich, longer-term traditional TH and transition-in-place programs:

- HUD assumes that "although they may have many additional challenges and service needs, the majority of families and individuals ... become homeless due to a financial crisis or other crisis that leads to the loss of housing. Addressing homelessness for these households primarily entails addressing their housing barriers to help them return to permanent housing." (p.1)
- Given the limited resources made available by Congress, HUD wants those resources to "be used most efficiently to ensure that assistance can be provided to the greatest number of people experiencing homelessness. An operating principle is that households should receive *'just enough' assistance* to successfully exit homelessness and avoid returning to the streets, other places not meant for human habitation, and emergency shelters." (p.1)

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<sup>30</sup> Families randomly assigned to SUB, on average, also had fewer negative experiences (homelessness, child separations, and IPV) than families assigned to CBRR or PBTH. [Family Options Study](#); Executive Summary, Exhibit ES-5 (p. xxv)

"SUB also produced a major reduction in the share of adults who experienced intimate partner violence in the 6 months prior to the follow-up survey, cutting the incidence in half, from 12 to 6 percent. This effect is consistent with qualitative evidence from the Effects of Housing Vouchers on Welfare Families evaluation, where some female family heads reported that vouchers were helpful in escaping difficult or abusive domestic situations." (p.72)

By comparison, CBRR and PBTH interventions yielded a less than 10% average reduction in the experience of IPV among study families. Exhibit ES-5 (p. xxv)

- HUD states that "the focus of services in rapid re-housing is primarily oriented toward helping families resolve their immediate crises, find and secure housing, and connect to services if/when appropriate. . . . This ***crisis-related, lighter-touch (typically six months or less) approach*** allows financial and staff resources to be directed to as many individuals/households experiencing a housing crisis as possible. At the same time, depending upon funder flexibility, programs should be designed to allow households to return for more assistance if they need it at a later time." (p.5)

What is clear from our interviews with providers and from the literature, is that ***different survivors have different needs; and no single approach is able to address the needs, circumstances, and preferences of all survivors and all operating environments***. While some highly resilient survivors may have the wherewithal to quickly bounce back and find or resume gainful employment that allows them to afford decent housing, many other survivors are not able to efficiently rebound from the physical, emotional, and psychological impacts of chronic abuse and often lack the qualifications to enter or re-enter the workforce in a position that offers a salary that is adequate to sustain appropriate housing and meet their other costs of living.

Given that housing insecurity and fear of homelessness are powerful reasons for staying with or returning to an abusive partner that survivors might otherwise leave,<sup>31</sup> interventions that make it possible for survivors to access safe, decent affordable permanent housing also need to address sustainability of that housing.

Although they may not need anything as extensive as permanent supportive housing, many of the survivors who become homeless in fleeing domestic violence, or as a consequence of repeated victimization by sexual violence (which may well have continued while they were homeless), need more than just help overcoming their "housing barriers;" they need longer term -- and more expensive -- housing assistance and/or supports in order to achieve stability. An intervention that provides only "just enough assistance" to start a tenancy may leave them vulnerable to re-traumatizing financial and emotional crises and recurrent homelessness.

Taken together, the provider comments at the end of this section strongly suggest that there is no one-size-fits-all solution that will address the needs of each and every victim/survivor. Provider comments illustrate the ***importance of being able to offer and provide alternative options*** -- different configurations of housing, different kinds of services, and different types of financial assistance -- and programs with the capacity to offer more comprehensive and extended assistance -- to address the range of survivors' needs.

### ***(ii) Alternate Transition-in-Place Models -- The Value of Flexible Funding***

Two programs that have taken a more comprehensive approach to the rapid rehousing/transition-in-place model are the Domestic Violence Housing First Program of the Washington State Coalition Against Domestic Violence (WSCADV), and Volunteer of America Oregon's Home Free Program. These programs' successes would not have been possible without the additional, non-governmental flexible funds that they were able to leverage. Their approaches and experiences, however, may be helpful to the assessment of the respective strengths and challenges attendant to a temporary housing approach versus a transition-in-place approach, in that they explode the usual constraints associated with the transition-in-place/rapid rehousing model.

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<sup>31</sup> In her "Fifty Obstacles to Leaving (a.k.a. Why Abuse Victims Stay)," [Buell \(1999\)](#) lists financial abuse, financial despair, homelessness, and "no place to go" among the impediments to leaving, and describes a "comprehensive Texas study [that] found that 85 percent of the victims calling hotlines, emergency rooms, and shelters had left their abusers a minimum of five times previously, with the number one reason cited for returning to the batterer being financial despair." (p.20) In their comprehensive survey of literature on the process, predictors, and impediments to leaving an abusive relationship, [Anderson and Saunders \(2003\)](#) state that "Income variables were not only among the most consistently related but possibly the most powerful predictors of the stay/leave decision overall, even when controlling for a variety of psychological and other variables." (p. 171) In their work to develop and test the reliability of a metric to measure safety-related empowerment, [Goodman et al. \(2016\)](#) observe that "Advocates can be severely limited in their ability to facilitate empowerment among survivors who lack basic resources, [because] working toward safety sometimes produces new and greater economic challenges...." (p.178)

### **The WSCADV Domestic Violence Housing First Program**

The Domestic Violence Housing First program innovated by the WSCADV and member programs, with funding from the Bill and Melinda Gates Foundation, is an example of a hybrid approach that helped survivors stay in their existing housing, if that was what they wanted, and rapidly rehoused other survivors who were ready to flee, providing as little or as much assistance as the survivor needed to gain safety and stability.

A first cohort of four agencies and the WSCADV piloted the initiative from 2009-2012, and a second cohort of nine agencies, targeting a somewhat more diverse survivor population "with significant financial and other challenges in underserved communities, such as communities of color, Native [American], and immigrant communities" across the state was funded from 2011-2014.

As described in [Mbilinyi \(2015\)](#), the February 2015 Cohort 2 Agencies Final Evaluation Report, the WSCADV's DV Housing First initiative operated with four central principles: survivor-driven advocacy, community engagement, housing stability, and flexible financial assistance. The rules governing eligibility for assistance and use of the flexible financial assistance were very different from HUD, but also different from OVW. For example, about half of all survivors were living in their own home while receiving program-funded assistance.

Flexible financial assistance -- ranging from \$40 to \$10,000 and averaging \$1,250 per survivor -- was available to cover a broad range of expenses, including changing the locks on a door, replacing a car battery, childcare, transportation, school supplies, uniforms and permits required for employment, as well as time-limited rental assistance. At the point of intake, 46% of participants were categorized as "light touch," meaning that they needed only one-time "mobile advocacy" or financial assistance from the Cohort 2 agency. One-quarter of participants were categorized as "medium touch" at the point of intake, meaning they needed legal and support services and mobile advocacy, in addition to any "light touch" assistance. The remaining 28% were categorized as "high touch," requiring substantial advocacy and longer-term financial assistance.

*"Nearly all survivors surveyed (97%) agreed that DVHF services increased their safety and that of their children.... Advocates and survivors defined safety not just as physical safety from violence, but also as safety from substance abuse and dangerous communities/neighborhoods. Although half of survivors had housing at program entry, they needed resources to retain that housing or to move to safe and healthy housing. For example, some survivors were living in homes without heat or homes located on the ground floor in an alleyway. Some survivors were still fearful of their abusers, due to the abusers' continued stalking and/or violation of court orders, so advocates worked to find these survivors more secure and confidential housing. However, obtaining housing was challenging: Subsidized housing in remote rural communities is scarce (a situation that is even worse for those without legal immigration status), and housing in urban areas is not always affordable. . . .*

*Many survivors reported that having a permanent home allowed them to heal from trauma and recover from chemical dependency. Survivors in recovery gave countless examples of establishing boundaries with family, friends, and neighbors who may still be using or abusing substances. Survivors spoke of advocates' emotional support as integral to recovery and highlighted their nonjudgmental approach. . . .*

*Stable housing enabled survivors to focus on their goals beyond housing, including school and livable-wage jobs. Survivors took pride in providing for their families. In some cases, survivors were even able to start their own businesses with help from the DVHF program. The DVHF program was deemed responsible for removing isolation in survivors' lives. Survivors were now connected not only to a supportive advocate, but also to a healthy community. Flexible financial assistance allowed agencies to reach a broader group of survivors by offering a range of options for housing stability. Agencies were able to meet the needs of survivors who may not have been served in emergency shelter -- including survivors with significant mental illness. Flexibility allowed for advocates to better meet the needs of all survivors, increasing their health and well-being in the process." (pp.32-33)*

### **Volunteers of America Oregon's Home Free Rapid Rehousing Program**

The positive impact on survivors' lives of another rapid rehousing program -- the Volunteers of America (VOA Oregon)'s Home Free program -- combining rental assistance and domestic violence services, was affirmed by a study conducted with funding by a grant from the U.S. Centers for Disease Control. The so-called SHARE Project report (hereinafter [CDC \(2010\)](#)), found "general improvement in outcomes for the entire sample in the first 6 months, which extended through the 18 month [study] period in level of danger, PTSD, depression, general health, quality of life and **housing stability**." <sup>32</sup> (p.2)

Essential to the success of the program was its ability to leverage a mix of public and private funds to supplement a HUD Supportive Housing grant, allowing it to serve survivors who did not meet the standard definition of homelessness, and to make expenditures and provide services which would not have been allowed under HUD program guidelines.<sup>33</sup> With the flexibility that its diversity of funding sources allowed, and with its commitment to leverage the full range of emergency and supportive services available through VOA Oregon,<sup>34</sup> the mix of services provided to Home Free participants was at the more comprehensive end of the spectrum, as compared to programs largely dependent on government grant funds.<sup>35</sup>

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<sup>32</sup> Citing the inadequacy of the standard binary distinction between housed and homeless, the project "created a measure that captures the multiple components of housing instability" and established that their **Housing Instability Index (HII)** "had strong psychometric properties." The HII asks whether, in the past six months, a person has: (a) had to live somewhere they did not want to live; (b) had difficulty or inability paying for their housing; (c) had trouble getting housing; (d) had to borrow money or ask others for money to pay the rent/mortgage; (e) had trouble with a landlord; (f) had to move three or more times; and (g) been threatened with eviction or served an eviction notice. The HII also asks two questions about the prospects for the short-term: (h) does the person expect to be able to remain in their housing for the next six months; and (i) are they likely to be able to pay their rent/mortgage this month. (see p. 20 of [CDC \(2010\)](#))

<sup>33</sup> See [NAEH \(2010\)](#)

<sup>34</sup> Personal communication with K. Billhardt.

<sup>35</sup> As described in ([CDC 2010](#)), the Home Free program offered extensive supportive services with RRH placements:

*"Using a 'Housing First' framework that emphasizes rapid return to permanent, neighborhood-based housing, intensive advocacy begins with overcoming the family's barriers to housing. Once a permanent, safe home is established, the survivor and her advocate address other facets of the family's needs in order to help them sustain their housing and maintain self-sufficiency. Child and youth advocates accompany adult advocates on home visits to provide advocacy support for children and ensure they are receiving the services they need. VOA advocacy services include mobile, active assistance with a variety of systems, including criminal and civil legal systems, law enforcement, child welfare, immigration, health care, public school, and others with which the survivor must interact to address her needs and those of her children. Advocates accompany survivors to appointments and hearings, assist with navigating these systems, and speak on women's and children's behalf when necessary to secure needed services or relief. Their commitment to reaching survivors means mobile, active advocacy that reduces the barriers to DV support services. Their commitment to inclusion means that all of their services are free, flexible and individualized, and driven by survivors' needs and goals.*

*VOA provides a range of services, including emergency, transitional, children and outreach services. Emergency services include crisis hotline, safety planning and advocacy, assistance with relocation and confidential address programs, emergency housing through placement in motels, ongoing one-on-one emotional support, referrals to and help with community and government resources. Transitional Services include permanent housing support, personal, financial and educational goal planning, active help with moving through and understanding complex service systems, long-term one-on-one advocacy support, home visits, accompaniment to court and other appointments. Children's Services include Safe Spaces, a group for children exposed to DV, teen services and girls' empowerment groups, one-on-one, age-appropriate mobile advocacy, parenting and DV support groups, referral to educational, recreational, and other community programs, intervention with families involved with child welfare. Outreach Services offer support in a number of community settings including child welfare and public assistance offices, the courthouse, Portland Police Bureau's DV unit and the county jail. Outreach Services include confidential support groups in English and Spanish, safety planning and advocacy, assistance with relocation and confidential address programs, access to emergency and transitional housing resources, ongoing one-on-one emotional support, referrals to and help with community and government resources." (pp.12-13)*

A [2012 PowerPoint presentation by Rollins and Billhardt](#) summarizes some of the findings in [CDC \(2010\)](#).

Importantly, as discussed in [Clough et al. \(2013\)](#), the success of the Home Free rapid rehousing program depended on its ability to access housing that was affordable to and sustainable by the survivor; as the supply of such housing diminishes and the demand and competition for that housing increase, the ability of such programs to make sustainable placements is threatened. Indeed, Martha Burt's seminal 2006 report on the [Characteristics of Transitional Housing for Homeless Families](#) (not necessarily targeting DV survivors) observed that, "The reality of these transition-in-place programs, according to many program representatives we interviewed, is that most families end up moving anyway, because they do not have enough income to take over paying the rent once they are no longer subsidized by the TH program." (p.50) Unfortunately, the disparity between housing costs and incomes/wages has only gotten worse since Burt's study. ([NLIHC, 2015](#))

Although they emphasized the importance of placement in properties with rents that participants could afford after temporary transition-in-place assistance ended, almost all of the providers interviewed for *this* project expressed concerns about survivors' increased difficulties finding decent, safe affordable housing (and similar difficulties finding employment paying a livable wage -- a concern that was also noted in [Clough et al. \(2013\)](#)). Although only a few providers cited instances of participants being unable to take over rent payments when that assistance ended, because the interviews did not explicitly address longer term housing retention, and given provider feedback about the relatively low percentage of participants who engage in follow-up services, it is unclear whether most providers would have known about loss of placement housing, say, 6-12 months after program assistance ended.

#### **(d) Provider Comments -- Temporary versus Transition-in-Place Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) We do scattered-sites; we don't own or operate any of the units. The leases are in the women's names. Right now, we're working with 10 different landlords and 17 different units. The decision to go with mainstream landlords and to have the women named on the lease was based on our experience owning shelters, which we weren't great at. We decided we were good at supportive services and case management, and that assisting women in leasing transitional housing would be our best approach. We wanted the women to have the housing in their names, because they are working on self-esteem and control issues. Signing the lease would give them control over their home and their families. And, since the lease is in their name, they can stay after they complete the program, as long as they can make the payments after our assistance ends.

If someone in our shelter is a candidate for our transitional program, we ask how many bedrooms her family will need, what kind of employment she's looking for, what neighborhood she'd like and feel safe in. We want to make sure the children are in a school system she's comfortable with. We gather info from the woman and do a housing search and show her the apartment complexes. If a woman has a bad housing history or other housing barriers, we rely on our relationships with landlords in the community: "I know this person has been evicted before for non-payment of rent; we'll be involved and make sure the rent is paid." Subsidized units are hard to find here. I don't think any of the women we've placed so far have had subsidized housing or a Section 8 certificate. Most units are rented at a fair market price. Because of that, some apartments are not in the greatest neighborhood, but as long as the women are comfortable; that's what matters. It's their decision. We may try to steer them away but it's their decision. And although we can find the apartment for them, a lot of women are resourceful and get online or talk to the other women and find their own housing.

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(#02) Our units are individual apartments scattered in two different apartment complexes; we have an MOU with the owner to provide services for the residents. There's an anonymity or confidentiality for participants in our program, because our staff also provide social services to other families living in the buildings, so other residents of the buildings -- and other providers -- don't know which of the tenants are DV survivors being

served by our transitional program. While they're enrolled in the program, the rent for their apartment is paid by the program; participants don't make a rent contribution. As long as they're in the program, through the different funding sources, the program is also paying for the utilities, alarm system, cell phone, and whatever else is needed. They have a savings plan and they contribute to their savings plan; when they transition out of the program, they can access those funds to pay their utility deposits and rental deposit.

When they transition-in-place, they become the official tenant of their unit. Because we have a relationship with the apartment complexes, participants can transition-in-place at a reduced rent for a 6-12 month period to allow them the opportunity to gradually work up to paying market value for the rent. As building residents, participants continue to have access to our agency's social workers. Because they can transition-in-place, they don't lose neighbors, schools, libraries, shopping, church connections, the bus route -- things a family needs.

And our agency just picks up another apartment in the complex, and brings a new family into the program.

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(#03) I like the way our transitional apartments are set up, because the clients know, "This is my home for the next two years, but I'm going to have to move on somewhere better." Sometimes you need that clear-cut end to a program. If I was in my own apartment and financial assistance was slowly ending, I don't know if I'd ever have the realization that I was going to have to be fully on my own. I'd think I could always depend on that assistance.

We help place our transitional graduates in units owned by a core group of landlords who know us and know that we're workable. But I would worry about a transition-in-place program where the landlords don't know whether the clients will be able to keep up with the rent once the program pulls out.

Some of the transitional clients we serve now aren't readily employable, and I don't know if I would recommend them for transition-in-place program knowing that it might take them longer to become economically self-sufficient, and that our agency would have to up-front more money to help them stabilize in independent housing, rather than being in this residential program setting. If we operated a transition-in-place program, I would enroll someone who had held a job in the past and maybe just needed to leave that job due to the violence, someone with the qualifications and skill sets that would make it easier to find them a new job or help them become financially stable, so our agency wouldn't have to upfront as much money.

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(#04) HUD distinguishes between transitional housing and transition-in-place housing, which it considers permanent housing. We have HUD funding for both kinds of programs. I would say that if a survivor was out of the abusive relationship, and is ready to establish her own household, she would probably be better served in the more permanent transition-in-place type of housing. If a woman needs time to get on her feet, she would be best served in a transitional unit. For instance, we just enrolled a single mom who's highly educated and who, I think, will probably exit to market rate housing, because she's had jobs in the past; her need for supportive housing is situational and temporary. Someone coming out of a violent relationship who needs the two years to get back on their feet and rebuild their life would be best served from transitional rather than permanent.

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(#05) I think there are several advantages to a transition-in-place program versus a program that offers temporary housing. The participant is able to have the house or apartment in her name, which allows them to work on improving their credit. And regardless of whether the participant decides to continue in the program, they still have their own residence, because the lease is in their name, and that also reduces any liability of the agency. It allows the individual to decide on what neighborhood they want to live in and what schools they want their kids to go to, which is important in terms of them being able to feel like they have choices.

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(#06) We have two programs: a 42 unit site-based program that we call emergency-to-transitional because we take folks when they're in crisis, or really at any point, but they can stay for two years. We also have 15 units of scattered-site transitional housing. Participants are not asked to contribute to the cost of their housing in the emergency-to-transitional program; however, in the scattered-site transitional project, where they've actually signed a lease with a landlord, we work it out collaboratively. We don't have a formula for how much we provide. We know how much we can offer over the course of two years, and we work with the survivor to figure out what our contribution will be: whether, based on their situation, they need us to pay all of the rent for the first six months and then they can start increasing their contribution, etc.

We are big fans of the transition-in-place model. If we could do it all over again, I think we would have made our entire program scattered-site because at the end of the day, that's what survivors want. The idea of needing lock-down, fortress-like safety from an abuser is just not the reality that we're hearing from the majority of the survivors who come to us. This idea of fleeing the abuser and needing a place that offers that level of security is not what the majority of survivors coming to us looking for. I think people want their own homes, and they don't want to leave their communities, where they feel safe or where they have connections to friends, family, and schools. We've just had such wonderful experience through our scattered-site.

And maintaining a building is so cumbersome, and so many things become an issue with a building. We try not to do rules, but in a community like our 42-unit program, we have to manage behavior that becomes unsafe or raises issues. There are just so many things that a scattered-site-type program can address in a different way. And you don't have the worry looming over families that they have to leave in two years. Instead, the focus is really on how we can help this family maintain housing. And that's so much more forward focused.

With a transition-in-place model, and with voluntary services, participants immediately get to the goal, which is permanent housing. So you get that out of the way, and then you focus on the other issues -- on how you're going to maintain this housing -- as opposed to in our site-based program, where the issue is, "What are you going to do about your living situation in two years?" It's such a more productive use of time. The temporary housing model is just so anxiety producing, as opposed to the transition-in-place approach, which get that big question out of the way, and allows the survivor and staff to focus on increasing income, helping the family, helping the survivor obtain the education or training she wants or needs. We have great partnerships with organizations that focus on that. It just feels like it's a better use of time and energy all around.

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(#07) Years ago, we used the transition in-place model. But then one of our landlords changed management companies, and the new management company wouldn't allow our clients to transition in-place; they had to move out at the end of their program stay, so the model changed. Now, when those participants are getting ready to leave, we work with community partners who provide what we call housing location services, helping the families find apartments to rent or share or situations in which they can move in with family or whatever.

Our other program also primarily uses a temporary housing model, due to the same landlord concerns about transition-in-place, but one of the landlords has agreed to allow our clients to transition in-place. But the process is complicated, because if we lose a unit when a client transitions in-place, we have to look for another unit. If we don't have enough time to locate an apartment where a new participant can move to and enter our program, that creates a problem for us, because we're not demonstrating the capacity we need and promised to the funder. So we work with the landlord and let them know that our client would like to transition in-place, and they find us another one of their units which can replace the one we lost to the client.

Sometimes, our participants may not be able to transition in-place because their income does not fall within the income requirements established by the landlord. For instance, one of our landlords required an income between \$36,000 and \$49,000 in order to rent their 2BR apartment. This is much more than most of our participants earn. So even if they would be allowed to transition in-place, they wouldn't be able to meet the income requirement for that particular landlord. And it's not just the rent requirement. Landlords do credit checks. Because we are the lease holder while participants are in the program, none of the landlords we use

do credit checks on our clients while we are paying the rent. But if the participants want to transition in-place, they have to go through the normal screening that every other renter goes through when applying to lease. Because of the relationship we've built with the landlords over the years, they might waive certain criminal record issues that come up when they do the background checks, but if a participant is going to apply for a lease in their own name, they have to go through the same process that every other person goes through.

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(#08) The transitional housing program has 23 units, all for single parents with children, in five four-plexes on one street. The buildings are not identified in any way. We own the units and HUD helps us with the operational costs for the units. As HUD requires in its grant-funded transitional housing, participants have month-to-month leases and pay the maximum of 30% of their adjusted income or ten percent of their gross income; so on average, they're paying \$85 a month for rent, including utilities. The utility bills are in the client's name; they bring us the bill and we pay it using their contribution towards rent and with grant funding. Participants can stay in our transitional units for up to two years. We've found that 9 to 12 months is probably ideal; if a resident is in that program any longer than that, they tend to get a little too comfortable.

Our agency has been in business for almost 25 years; the transitional program was our cornerstone program. We are adapting as the community and HUD's philosophies and policies change. But it is a conscious choice at this point to fight for that program because we don't want to put victims at a higher stress or risk by forcing them to get a disability verification to go into permanent supportive housing, and because they're not ready to do rapid rehousing, either. In our opinion, there are just too many variables that are going to contribute to them not being successful in rapid rehousing.

In our economy, it's easy to get on-call work or maybe some part-time work, but that's not going to be a viable path towards financial self-support at the end of that period. We serve some women that are barely 25 years old, that are TANF-exhausters, with a history of victimization, no stable work history, facing loss of benefits income and services, and having to go into a job market where they have no marketable skills. They're not a good candidate for rapid rehousing. If someone has worked maybe six jobs for three months in each in the last couple of years, they're just not a good fit for that program. Our CoC is piloting coordinated intake for individuals, but our participants are just not good candidates for rapid rehousing. When they go through the program and aren't successful, they end up back in shelter. So instead of doing something to help them, we've made their situation worse; that's why we're so adamant about the TH for this population.

### ***Questions to Consider***

**1.** If you were enrolling a new participant and you had openings in both a transition-in-place program and a program that utilized housing that your agency owns or leases and makes available to participants on a temporary basis, how would you describe the pros and cons of each approach to a new participant?

- Are there some survivors for whom temporary housing is inherently better than a transition-in-place unit, apart from considerations like the location, living arrangement, cost, etc.? Why?

- Are there some survivors for whom transition-in-place housing is inherently better than a temporary unit, apart from considerations like the location, living arrangement, cost, etc.? Why?

**2.** Sometimes what prevents a survivor from participating in a HUD-funded transition-in-place program is their barriers to obtaining a lease from a mainstream landlord (e.g., unreliable income, poor credit, prior evictions, etc.). Sometimes, a new participant is not emotionally ready to take on responsibility for the lease. If you had the flexibility that an OVV grant provides -- but that HUD does not allow -- to shift midstream from leasing an apartment on behalf of the participant to providing rental assistance once that participant has taken over the lease (with the landlord's permission, of course), would that change your recommendation vis-à-vis temporary versus transition-in-place housing for the participant in Question #1?

3. Typically, provider-owned housing and provider-leased housing are closer to the provider agency's offices and to other services than the housing that participants lease in a transition-in-place program. If participants could lease safe, affordable scattered-site housing that was no farther from your offices than provider-owned or provider-leased housing, would that change your recommendations?

4. Often, provider-owned housing is congregate or clustered in one or two buildings, while transition-in-place housing is more scattered. To what extent is your recommendation about temporary housing versus transition-in-place housing influenced by the living arrangements they support, and, in particular, by the opportunity that living in close proximity creates for group programming and peer support?

## **4. Provider-Owned Housing**

### **(a) Overview of Provider-Owned Housing**

Provider-owned housing is typically configured as congregate or clustered units, but there are also some examples of provider-owned scattered-site housing. Provider-owned housing is typically temporary, but there are a few examples of provider-owned transition-in-place housing. Because enrolling new participants requires open units, a transition-in-place model only works in provider-owned housing that includes a sufficient number of units so that natural turnover creates vacancies as needed.

For the most part, participants probably wouldn't notice the difference between provider-owned and provider-leased housing. However, some provider-owned housing is on a campus that includes the shelter and other provider facilities, for example, where childcare is provided, support groups and other group activities are held, visiting clinicians meet with participants, etc.

### **(b) Relative Advantages and Challenges of Provider-Owned Housing**

#### **(i) From the Provider Perspective**

- On the plus side, providers that own their own buildings:
  - Can build in space for staff offices and program activities.
  - Can install permanent safety features, and so are able to provide greater onsite security, especially in the case of on-campus housing.
  - Are not subject to eviction by a third-party property owner
  - Can quickly place an applicant when a unit opens up; acceptance into the program is not dependent upon finding an affordable unit of housing in the larger community. However, because the size of the units is largely fixed (sometimes units can be reconfigured to create additional bedroom capacity), provider-owned housing may have limited flexibility to accommodate large families.
  - Can accept a survivor into the program despite the kind of barriers that might prevent her from obtaining housing from mainstream landlords (e.g., unreliable income, prior evictions, bad credit, lack of immigration documentation, etc.).
  - Can waive the occupancy fee if participants can't afford the usual contribution to their housing cost.
- Since provider-owned housing is more likely to be congregate or clustered, and since providers have the option of building in space for staff or program activities, staff in a program using provider-owned housing are likely to have easier access to participants, which allows opportunities for the kind of more casual interactions that help build the kind of trusting relationships that support healing and progress.
- To the extent that provider-owned housing is part of a larger campus or proximate to the provider agency's main offices and/or shelter facility, program staff have relatively easy access to their supervisors and to other agency staff (e.g., clinicians/counselors, children's advocates, employment specialists, etc.),

whom they can call on for consultations and assistance. Such proximity allows staff to offer parents onsite or nearby childcare and children's activities, making it easier to schedule time with participants.

Being part of a larger provider team can prevent the isolation that small one-staff member programs can experience, and provides opportunities for group trainings and peer support activities, which can help with staff retention and early recognition and response to vicarious trauma.

- On the negative side, providers that own program housing must address the challenges of building upkeep and maintenance.
  - Grants typically focus on services, and don't necessarily address routine maintenance and repair costs, let alone unplanned costs for repairing building damage, repairing or replacing equipment that has failed, higher-than-anticipated use of utilities by participants, and other such operating costs. Grants may also not cover mortgage and property insurance-related costs. With the exception of utility costs, none of these costs are an issue in leased housing arrangements.
  - If a provider agency owns enough property, it can employ specialized operations staff and allocate the cost of property maintenance across its housing program(s). If it doesn't own enough property to justify employing operations staff, it can either contract out for property maintenance services, or add property upkeep-related responsibilities to the job description of direct services staff. Although some direct services staff may have the necessary skills, and may enjoy these responsibilities, others don't. Perhaps more important, focus on property upkeep takes time and focus away from the more central work of supporting participants in their healing and forward progress.
- Also on the negative side, property ownership puts the provider agency in the dual role of landlord and service provider. Although some provider agencies contract out for property management services to avoid having to play the role of landlord, others are willing to struggle with the challenge of balancing their roles as advocate and landlord in handling participant lease violations that could lead to eviction.
- On the plus side, participants' occupancy costs in provider-owned housing are not subject to the real estate inflation that keeps pushing rents higher. On the other hand, providers still must cover their property maintenance costs and the cost of participant utilities, and those costs are subject to market forces, and may necessitate periodic increases in occupancy charges.

**Note:** Several of the providers interviewed for this project indicated that their units were subsidized through a partnership with their local housing authority. A number of these providers have been notified by HUD or their housing authority that units subsidized with project-based Section 8 vouchers or other HUD resources intended to be used for permanent housing may not be used for transitional housing; that is, participants may not be required to vacate their program apartments. One way that these programs have adapted is by trying to incentivize survivors who have "completed" the TH program to leave their unit, by offering them mobile vouchers they can use to lease mainstream apartments. If survivors who have "completed" the program wish to remain in their subsidized units, they must be allowed to do so, which may or may not impact the program's ability to enroll another survivor.

### ***(ii) From the Participant Perspective***

- Survivors moving into provider-owned (or provider-leased) units may have more time to prepare for their housing search (if, indeed, independent housing is the survivor's eventual goal) than do survivors seeking to enroll in a transition-in-place program which uses CoC Rapid Rehousing funds, and which therefore requires the participant to find a landlord who is willing to put a lease in her name. For that same reason, survivors in program-owned/provider-leased units also have more time to work on getting a job.
- Depending on the nature of their housing barriers, some survivors might not be able to find a mainstream tenancy; provider-owned housing typically has the fewest entry requirements.

- Survivors who need housing with heightened security are more likely to be afforded that security in provider-owned housing, than in a commercially rented apartment.
- Survivors who fail to comply with all the lease requirements (e.g., who miss a rent payment, or whose child damages a unit) are less likely to be evicted in provider-owned housing, than a private market unit.
- For survivors who are interested in taking advantage of the more comprehensive services that a full serve agency can offer, living in provider-owned housing is likely to provide convenient access to those services, as well as offering access to child care while the parent is utilizing other services. Similarly, for survivors who are interested in leveraging the benefits of peer support, living in provider-owned housing is likely to provide convenient access to group activities, as well as proximity to fellow participants.

**(c) Provider Comments about the Advantages of Provider-Owned Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) There are two components to the transitional housing (TH) program. Phase 1 is the Shelter-Based Program - 3 rooms in the emergency shelter. Phase 2 is an 11 unit apartment complex in a different part of town. Our agency owns the buildings that the congregate shelter and the clustered Phase 2 units are in. In our Phase 2 units, a case manager is based in the same building as the units, so participants have easy access to support staff; and there's also a property manager there to help -- just like if they lived out on their own. Although clustered units don't provide participants with the same opportunity to be intermingled with the general populations as scattered-site units, having all the participants in the same building makes it easier for people to come to their support groups, which are held on-site.

(#02) If we didn't have the challenges associated with changes in length of stay policies with our HUD-funded scattered-site units, we probably wouldn't be pursuing additional property ownership at the level we're considering it now, given the considerable expense of maintenance and upkeep of our existing three-building complex. But I think we would always want to have one option that allows us to provide transitional housing without assessing a charge to the clients. Participants in our agency-owned units have a phone provided, a security system provided, it's all comprehensive. And although we do pretty well with being able to house most immigrant survivors through the scattered-site model, despite their lack of a Social Security number, they have financial challenges meeting their expenses, and it is beneficial to be able to offer them space in our own facility.

(#03) Owning a house is an opportunity for job training – like with our house managers, we're teaching them property management. So they can put on their resume that they know how to manage property. Something breaks, who do you call? I prefer owning the house because of what happened to us the first few years we were open: we rented a house, we had community volunteers come in and redo that particular house, and then the guy who owned it said "I'm selling the house. You have 30 days to move."

We have a really good relationship with different kinds of landlords now who actually work in the field, but they could come to us at any time after lease is expired and say "Sorry but I'm selling the house." I think owning a house presents many more opportunities that we may not have considered. I look at it like just another way to train another woman in some additional job skills.

**(d) Provider Comments about the Challenges of Provider-Owned Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) From a management perspective, it would be nice to have a landlord that can fix everything so that program staff are not having to do it. For example, when a participant leaves their apartment in total disarray or damages the property, it's on staff to fix. Of course, if we used a scattered-site model, the landlord might charge the program to fix things, replace the carpet, etc.

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(#02) If we had 11 scattered apartments, in lots of ways it would be easier than owning some of our units. Daily maintenance and upkeep of the house we own is tiring. If a child flushes a cell phone down the toilet, they call me and I have to call the plumber. It can be very time-consuming. Of course, with scattered-site rental units, you have to pay damages; in one case, the cost of damages exceeded the security deposit.

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(#03) Our number one challenge, specific to transitional housing, is owning the duplexes. It's not something we'd do again. It gets really messy in terms of your dual role as an advocate and a landlord. You can have clients that don't pay rent, and you know their situation, they've lost their job or their child support hasn't come in, but you need to collect rent. That's an icky place to be. This year, we had a client who inadvertently left an item on the stove, which caused a fire. She got scared and blamed the problem on us for not fixing what she said was a broken stove. She's our client and she lost everything, and it's our job to advocate for her, but because she got scared, she called us slumlords and said we'd been horrible to her, and we had to go through an investigation. If this had happened in a private market unit, our role would have been clearer.

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(#04) Maintaining our own property can be challenging from time to time, as well. Thankfully, we have good relationships with utilities in our area, so they notify us if things seem to be crazy as far as usage. The cost of building maintenance is a challenge since we're a nonprofit. We don't have a big budget for repairs or major building maintenance, like if a water heater goes out. We have a small budget for outside maintenance, cutting grass, etc. We've had to rely on local donations and volunteers to keep up the property.

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(#05) If I could change something about our program, it would be to have scattered-site housing instead of having an agency-owned residence, and that's capacity we're trying to build for a few reasons. First, if someone wants transitional housing, with our model, they have to move to where the units are located, even if they have better job prospects in another community. Second, when they're done with two years and have saved up some money, they still have to find a new place and re-establish themselves. If we could go to scattered-site transition-in-place model, then when the end of two years comes, people could stay and not have to worry about moving. Ideally, the client would hold the lease, but if they're not able to get a lease in their name, we could hold the lease. Third, our transitional housing is in a small community, and everyone knows that this is where the survivors live, whereas with a scattered-site, no one has to know that you're receiving assistance from a victim's service agency, so you can just blend in and be yourself.

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(#06) With respect to the 3BR house we own, our organization will cover the cost of maintenance issues that OVW doesn't pay for, like cutting the grass, fixing this and that, and painting. United Way has a Day of Caring, and we often have them do some of the maintenance work that OVW doesn't pay for at our house, and other things at the five-unit building we rent. OVW does a good job of paying for pretty much everything else.

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(#07) In terms of holding down property maintenance costs for our apartment building -- we contract with a property management company; having a property manager onsite in our building has been really helpful. There certainly have been challenges, but for the most part, her expertise in property management and budgeting and taking proactive maintenance measures has been huge. For a lot of us who've worked in the field for a long time, it's the first time we haven't had to deal with facilities when working in a residential setting, which makes so much sense. I've worked in programs where I had to light the boiler; nobody should give me that kind of responsibility. Very scary. Having an expert manage property is great. I'm sure she has helped us tremendously in controlling costs in all kinds of ways. She does monthly inspections of the rooms and helps identify issues, and she gives our Executive Director a budget and they manage that together.

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(#08) Maintaining our aging housing stock is very expensive. Until now, we haven't been able to leverage tax credit refinancing for our older properties; a lot of the units were purchased through HUD or with HOME dollars, and we're just getting through the restriction period, so we can start looking at refinancing. Also, the municipalities wouldn't put any more money into the units while the 20-year restrictions were still in place. A lot of those units are becoming free of those restrictions, and we're looking at ways to bring more money in.

The most important thing in managing expenses is your relationships with your tenants. You need to be able to educate them on what it means to be a good tenant. I hate that phrase, but I don't know of a better one. One of our biggest expenses is not the daily maintenance of the units; it's the damages and just the general disrespect for the property. You should see how some of these units are left. A victim in one of our TH units just demolished a refrigerator. That is the main problem we face as an affordable housing developer or owner -- the damages -- because you can end up paying \$2,000 - 3,000 to get a unit ready for somebody else. We'll also get community agencies to volunteer and paint and do different things like that.

For our transitional program, we do bi-weekly apartment inspections because we are trying to teach them how to be good tenants and some people don't know what clean is, so we work with them. For our housing stability program, where they're renting out into the community, we don't go into their units unless we're doing the HQS (Housing Quality Inspection) which is required by HUD. We do work closely with the landlords so if there is an issue, we work with the landlord and tenant. Our own units, we're in every month to change air filters and provide pest service and things like that, so if there's a problem, then the maintenance men would notify the appropriate staff and we would address it.

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(#09) We have two programs, a scattered-site, transition-in-place program and a two-year program that utilizes four units in a building our agency owns. Applicants do not need an income to qualify for the site-based program. However, a big determinant of whom we can serve in that site-based program is the size of the available unit. We have a 1BR unit. We have two 3BR units and one 2BR unit. Other than that, we really try to screen people in, rather than screening people out, so we don't have a lot of program requirements.

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(#10) Being the landlord and owning the facility is great on the one hand, but overwhelming at times. Repairs and maintenance issues take up a lot of our time, and potentially take time away from client services. They're very important to address, but property management is not really our core mission. If a provider had a choice, that might be something to think about. But on the other hand, we own this and it's an asset and we can go forward and decide how to treat it. And owning our own housing gives us the flexibility to house clients who might be seen as risky to a more traditional landlord. And owning this one facility where seven families live in fairly close quarters allows us to create a sense of community. And we have been working really hard to build on that by creating inviting outdoor spaces, and activities, and things for the tenants to consider participating in together if they so choose. I think that both of those considerations are important.

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(#11) Our agency is in the second year of our strategic plan, and one of our goals is to assess whether we want to continue to be a landlord. We own just four units of housing, but there are still challenges with that. You don't have any other money to maintain the buildings. We're constantly trying to find funding for things like a new roof, new windows, painting, cleaning -- things that our funders generally aren't looking to pay for. Our three unit apartment building has had some storm damage, and we've had some people cause some damage. But I would say that those units have also been a blessing. A lot of people that have lived in our transitional houses over the years may not have been able to rent a privately owned apartment, just based on their housing history, credit issues, whatever. In that way, I have always really loved that we've had them.

And above and beyond the building maintenance issues is the landlord dichotomy, which is always tricky. You don't want to have to evict somebody that you're advocating for. Through trial and error, we've determined that no one person on our staff should make that decision independently.

Let's say a big issue comes up, like we've had allegations of big parties or drugs or problems with kids or nonpayment. We'll do an email to staff, and say "We need a housing committee meeting today." We always try to have someone who actually knows the person intimately as a part of that decision making group, and someone who's never met them, and then maybe a few people who know who the participant is, their scenario. You have to have a balance. It's easier to be objective when you're not emotionally attached to the woman's experience. I know when I've worked with someone, I want to give them lots of chances, and the circumstances often warrant it, but someone who is looking at a bigger picture might say, "I think we've done that already." I think that helps us, when we don't put it on one person. I think it's good to have a lot of different perspectives around "What's the best strategy here?" so that we can come up with something that's in the person's best interest but that allows us to continue to provide housing to other people. You don't want to run the whole program into the ground.

### ***Questions to Consider***

1. As the rental market becomes increasingly expensive, at what point does it make sense to explore agency-owned housing? How does the way that OVW and HUD reimburse providers for their costs facilitate or work against purchasing or developing such housing? How might other sources of funding help?
2. Is a long-term partnership with a property owner that can commit to maintaining affordable units a viable alternative to provider-owned housing? (Note that in the same way that housing with project-based subsidies cannot be used for transitional housing, housing developed with other government funding cannot be used as transitional housing, if that funding is intended to support creation of permanent housing.)
3. Can employing a management company to oversee lease compliance give a property-owning agency the necessary distance between the role of landlord and the role of participant advocate when a situation arises in which the participant has violated the terms of their lease or occupancy agreement?  
- How might that kind of arrangement work in provider-owned congregate housing versus in a provider owned building with shared apartments versus in a provider-owned building with individual units?

## **5. Provider-Leased Housing**

### **(a) Overview of Provider-Leased Housing**

Provider-leased housing may be congregate, clustered, or scattered-site. Provider-leased housing may be temporarily made available to participants in a traditional TH programs, or may be used in conjunction with a transition-in-place program, with the survivor taking over the lease either mid-program, or at the conclusion of their participation in the program. Although transition-in-place programs most often use a scattered-site model, there are a handful of examples in which providers lease clustered units from an affordable housing

provider, and the housing provider allows participants to take over that lease or offers them a lease in one of the housing provider's other units.

Depending on the program model, some providers lease the same units year-after-year, and then select survivors to fill those units. Other providers -- primarily, but not exclusively providers using a transition-in-place model -- allow participants to select the apartment they want to live in while they are in the program.

## **(b) Relative Advantages and Challenges of Provider-Leased Housing**

### **(i) From the Provider Perspective**

- Providers that lease property
  - Can install safety features, in consultation with property owner, to provide greater onsite security. The longer the term of the lease agreement, the more cost effective such installations can be.
  - Can, in most cases, quickly fill a program vacancy when a unit becomes available (as soon as the unit is cleaned); that is, they don't need the landlord's approval in order to sublet to the participant. In the case of a transition-in-place program, the landlord may be able to veto certain candidates.
  - Avoid the maintenance/upkeep "headaches" that come with ownership. However, they are responsible for any damages to the property that a program participant might have caused. The less often provider staff are onsite, the less likely they are to notice such damages, and therefore, the less ability they have to take steps to preempt additional damage.
  - Can accept a survivor into the program despite the kind of barriers that might prevent her from obtaining housing directly from mainstream landlords (e.g., unreliable income, prior evictions, bad credit, lack of immigration documentation, etc.).
  - Can occasionally waive the occupancy fee if participants can't afford the usual monthly contribution to their housing cost. However, providers that lease program housing also tend to be responsible for the cost of utilities for those units; if a participant incurs particularly high utility costs, providers must pay them if the participant can't.
  - Can lease units that are appropriate to the needs of different-sized households. However, if providers lease the same units year-after-year, they have the same challenge accommodating different-sized households as a provider that owns their program housing.
- When a provider selects the units it will lease, it has more control over the location than when participants select units, so it can cluster the housing, or restrict it to a smaller geography than might otherwise result if participants selected their units. The smaller the distance between units, and the closer the units are to the provider agency's offices, the less staff travel time. The closer to the agency offices, the better access that program participants have to other agency services (e.g., counseling, children's programming, employment assistance, etc.)
- On the one hand, providers that lease units from the private market have an opportunity to build relationships with landlords in the community, which might be helpful to participants seeking permanent placements later on. On the other hand, a bad experience with a program participant may limit the landlord's willingness to lease to other participants or to the provider. However, when a problematic situation develops between the program participant and the landlord, the provider can serve as a buffer between the property owner and the participant to de-escalate potential conflicts, which helps landlords avoid legal or other costs.
- When a provider leases privately owned units, rents are likely to be based on market rates, unless the provider is able to negotiate a special deal with the property owner. When a provider is able to lease units from a non-profit affordable housing provider -- assuming that the property's financing does not

preclude its use as transitional housing -- the advantages include long-term predictable and affordable housing costs (often with utilities included in the rent).

- If providers experience a delay in filling a unit of housing that they have leased, or if they are unable to fill such a unit because the grant cycle is almost over and the provider cannot count on renewal, they are still liable for the rent for that unit if it is under lease.

***(ii) From the Participant Perspective***

- Provider-leased housing allows participants to remain "invisible" if such confidentiality is required for safety reasons.
- Survivors can often be accepted into a provider-leased unit without having to be evaluated by the landlord for credit, housing references, and the other usual criteria for being offered a tenancy.
- Survivors moving into a provider-leased unit are able to bypass first/last/security move-in cost (although in a transition-in-place tenancy, the landlord will want the provider's last month's rent and security deposit to be replaced by payment of last month's rent and a security deposit by the participant, or on behalf of the participant by the provider).
- If a survivor living in provider-leased housing cannot cover their occupancy fee for a particular month, the provider can forgive that payment. However, providers typically count on payment of those occupancy fees when they build their program budgets, so there are limits to such flexibility.
- On the one hand, with the right landlord, tenancing a provider-leased apartment constitutes a good opportunity for a survivor to demonstrate their tenancy skills, so that they can use the experience to leverage a positive reference from the landlord.
- On the other hand, participants in a provider-leased unit don't have the opportunity to build an "official" tenancy history, and they may feel like they're in a program, rather than in housing.

**(c) Provider Comments about the Advantages of Provider-Leased Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) We have a HUD-funded transitional program with five scattered-site units that we lease from a private landlord for families with children; we hold the leases and we have the communication with the landlord. We can act as buffer between clients and landlord, which is greatly needed in those units. Because the lease is in our name, if someone moves out we can move someone else in quickly.

Scattered-site, like our family program, and congregate-style housing, like our single woman's program, can both work well depending on the clients. The tradeoff is having constant contact with participants to communicate and see how they're doing versus when they're in their own home, they decide whether to let you in to work with them or not. I've talked to organizations that have clustered apartments and that works well too. They all have pros and cons. When people live on top of each other they're going to be in each other's business, but community-style provides consistent support.

Scattered-sites are good for people who are ahead of the game. They can do as they need, receive services as they need, and move on when they're done. I wouldn't refer someone to a transition-in-place program -- especially a really short-term program -- if they haven't worked in a long time, aren't readily employable, have to complete their education, or have been fighting addiction. The goal is to make sure they're successful; not to set anyone up for failure. You can't go from shelter to your own place when homelessness is only one of the challenges you're facing. There's the substance abuse, mental illness, domestic violence, lack of education, etc. We don't have much experience with someone who comes into shelter and turns things around, gets their own home, and then everything's hunky-dory. People who need more intense case

management will do better in a temporary unit we lease. Other families just need a helping hand and they're good to go; for them transition-in-place is better.

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(#02) There's limited affordable housing in the area. We networked to find local private landlords who would give us better prices and be more lenient as far as tenancy requirements, because survivors often have bad credit, or not a lot of income, so they might have a hard time securing housing on their own. The landlords were willing, knowing that the rent would be subsidized by us for up to two years. The goal is that within two years, participants will be able to pay the rent themselves in apartments that fit their needs.

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(#03) One of the things we do to try to create a sense of competence or confidence in our participants is we make the check out to the landlord, but we give it to the client to deliver. What we try to do, which seems to work, is develop a relationship between the client and the landlord, and take us out as the person paying the rent. There's something very empowering for clients who have never had to pay the rent themselves or had the abuser paying the rent, to be able to get that check and to take that along with their own portion of the rent and feel, "This is my house, this is where I live, and now I'm going to be responsible for it."

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(#04) We have 20 units total, strictly for families. Each family has their own unit. The units are in complexes owned by our partnering housing authorities. When a client feels they've reached their goals and are ready to leave the program they have to leave the unit. That's where we run into a problem. Under HUD rules, a tenancy in a unit with a project based subsidy is indefinite. But our program is time-limited, so they have to leave the unit and find a new place when they've reached their goals.<sup>36</sup> If they don't move then we can't make their unit available to the next client. If there's a voucher for them -- if they've either increased their income or their education -- the voucher goes into their name, and they can use that voucher to move anywhere in the county. After their first year in a voucher-assisted tenancy, they can use the voucher anywhere else.

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(#05) We have 72 two-, three-, and four-bedroom apartments, all for families. The apartment manager lives in one unit, and a security officer lives in another unit. The apartment manager is an employee of the building management company, not our agency. She collects the rent and maintains and manages the apartments. We provide the services. The separation of roles helps keep it a little clearer and more like the real world. Of the remaining 70 units, 56 are subsidized with Section 8 vouchers, 12 have another type of subsidy which sets the rent at a below-market-rate level, and 2 are unsubsidized, and are intended for victims with higher incomes. To be honest, the women who are in those two market rate units are women who got portable housing choice vouchers and chose to stay. We haven't enrolled any victims/survivors with the kind of income they would need to afford market rate rent.

The families living in the apartments with the project-based Section 8 vouchers can stay in their apartment for a maximum of three years. We have some eligibility requirements that they work on and once they meet those eligibility requirements in those three years, they receive a portable housing choice voucher which they can use in another apartment that they move to.

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<sup>36</sup> This is a challenge that arises in a number of transitional housing programs that historically utilized units with project-based Section 8s or other financing mechanisms intended for use in permanent housing. Technically, these programs cannot require participants to vacate the unit, since the housing is intended to be permanent, even if the program framed it as temporary. Programs typically partner with Local Housing Authorities to offer participants a "portable" or "mobile" voucher, to encourage them to move on, so the unit can become available to serve the next client.

When we first opened, we tried to see if they could transition-in-place on the property, but there's such a need for transitional housing, that once they've stayed here for three years and earned that Housing Choice voucher, we really encourage them to move, so other women and their families can get into the program.

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(#06) We use an agency-leased scattered-site model because a good number of the people we serve wouldn't be able to obtain the units on their own, given landlords' strict criteria regarding income level, criminal background checks, and credit history. This arrangement also allows us to make sure that the units are maintained properly because we're the people who actually contact the apartment complexes if there are any maintenance or other issues -- which also allows participants to remain anonymous in the program.

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At the end of the program, participants have the option of taking over the lease of the unit they're in. When they are placed into a unit, they don't necessarily have a huge choice on what side of town it is, so if it's not where they would choose, they can transition to other permanent housing.

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(#07) Our transitional program serves two counties. In one county, we support up to five scattered-site units; the women find their own housing; we enter into a lease agreement or MOU with the landlord, and we provide rental assistance with the OVW grant funds, with the hope that the women can take over the lease when our assistance ends. In the other county, we have five HUD-funded rental units. Three of those units are transition-in-place apartments that the women find themselves. The other two units we master lease from supportive property owners that we've worked with for years.

The transition-in-place units tend to be for women who may have applications in for housing, are past the trauma to some degree, are on the road to recovery. They maybe have work and are further along in their healing and ability to manage the trauma. They know how much rent they'll be able to pay; maybe they know that their name is coming up on the Section 8 list, so they want to find a unit that they'll stay in permanently. And if we can get individuals into housing where they're going to stay, that's what we want to do.

For women at continuing high risk from their abuser, sometimes transitional housing leased by the agency works better because we can work with the property owner to put security provisions in place. We have a relationship with the local police, and can alert them so that they can be available to respond. By ensuring that everybody knows there's risk, we can work to minimize the risk. Transitional housing leased by the provider from an empathetic property owner may also be a better choice for participants trying to address an addiction or chronic mental illness, or those who have been highly traumatized by the abuse.

Because we use HUD funds, all the housing we assist must be priced within Fair Market Rent (FMR) levels and meet the "Rent Reasonableness" standard.<sup>37</sup> As the local economy heats up, we're seeing increasing housing prices and increasing competition for affordable units.

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(#08) Our agency leases two properties and we pay the rent directly to the landlord every month. These are landlords we've worked with for almost 10 years, so we've got a close working relationship with them, they understand the confidentiality needs of participants, and they're easy to work with. Under the arrangement,

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<sup>37</sup> HUD defines separate FMRs for properties in which utilities are included in the rent, and properties for which utilities are not included in the rent. Often in a hot real estate market, the FMR is lower than prevailing rents. The Rent Reasonableness standard is based on prevailing rents for comparable units. When HUD funds are used by a provider to lease a unit, the amount paid (for rent and utilities) must not exceed either the FMR or the Rent Reasonableness standard. When HUD funds are used by a provider to offer rental assistance for a unit leased by the participant, the amount of the rent (plus utilities) must fall within the Rent Reasonable standard, and the amount of the rental assistance must be at or below the FMR.

we can just move people in; we don't have to do an application on behalf of a particular participant because the lease is in our name, so if someone has bad credit or other barriers, those units are options for them.

**(d) Provider Comments about the Challenges of Provider-Leased Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) We have six co-located transitional units in our DV shelter, allowing stays up to six months. We also have eight participant households in scattered-site units owned by the Housing Authority. Although participants must move out of the units co-located in the shelter, with the Housing Authority-owned scattered-site units, if a participant obtains their own Section 8 voucher, they can keep those units forever or they can move elsewhere. The Housing Authority gives priority to our DV victims to get to top of their Section 8 wait list, so we have eight who received vouchers and they can keep the units until they no longer need them.

With the scattered-site units, our clients -- like any person in a Housing Authority-assisted unit -- are required to sign a lease with the Housing Authority and pay 30% of adjusted net income for rent. We don't subsidize their share of the rent, and we have no control over if they pay rent or have an income or not.

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(#02) I think the biggest issue we have is the fact that participants feel like they are in program, even though everyone has their own apartment, their own locking door, mailbox, kitchen, and bathroom. I don't know if it's because of the type of clients we serve or the fact that we are an agency and there are case managers in the building. We're asked to resolve a lot of interpersonal issues. "My neighbor was blasting her music. Can you tell her to turn it down?" And I explain that if my neighbor is blasting their music, I have to physically talk to them. In an ideal world, I would like to see us use scattered-site housing in the community, to help people integrate into a "normal" lifestyle without the support of a program. But, I know it's easier and cheaper to have a building and have all the participants there.

Our participants sign an occupancy agreement committing to pay 30% of their net income towards housing and utilities (included in the rent), no visitors more than 21 days in a calendar year, and other standard HUD rules. If I could change things around, I would look into whether we could use a transitional lease, because the term "lease" has legal and other implications, including tenants' rights. It's not that we're not giving our clients their rights, but without a lease, transitional housing clients think, "I'm not a real tenant. I don't really have tenants' rights." And we're like, "Yes, you do have tenants' rights. If you think we've wronged you, you can go through grievances, you can file court claims." They think it's a program, not an apartment. And we even get that from the local police department. If a client has an issue and calls the police, the police say, "That's a program issue. We can't do anything for you." If I could, I would use a lease and try to move away from that program mentality. Yes, we are an agency, but they have an apartment in an apartment building.

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(#03) Our transitional program consists of eleven one-, two-, and three-bedroom units clustered in one building owned by the Housing Authority. Participants sign a lease with the Housing Authority and pay the same 30% of adjusted income towards rent and utilities as any other Housing Authority tenant. At six months, they get a voucher, so they could potentially leave after six months. But they can stay up to two years getting support and services, figuring out who they are and what they are doing. Then staff work with them and with landlords, looking for housing, giving them the choice about where they want to go.

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(#04) We have six transitional units for families: three transition-in-place scattered-site units that we rent from local landlords using OVW grant funds, and three units that are on property we own, but not connected to our shelter. Ensuring that clients are safe in our off-site units is a challenge, because we're not there. At the

on-site units, we have cameras and can see that they're safe; but the off-site units pose a little more of a challenge. Our landlord provides security for them, but it's always a challenge to make sure they're safe. Visiting and making sure they feel safe is probably the most important thing. Assuring client confidentiality is also a challenge because the family is in an independent living situation. They sign confidentiality statements in which we ask them not to disclose information about other clients. Shelter is easier because we don't give out the address. But this is their home, so they have to be able to give out their address.

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(#05) Our family transitional housing program historically had some project based Section 8 vouchers that subsidized that housing. Families had to be eligible for Section 8, and they would move in and use the voucher while they were here, while they were waiting for a permanent Section 8 voucher. Then, when they got their mobile voucher, they would move out and the project based voucher would remain for the next family. Just about two years ago, after using those vouchers like that for 15 years, we received notification from HUD that they were going to eliminate that option, because project based vouchers were not meant to be tied to transitional housing. We spent the next year trying to figure out how to fund those units and how to still make them affordable for families. We worked with our local housing authority to create a priority for domestic violence victims within their Section 8 waiting list. And we also have some HUD ESG money that comes through our state that we're able to use in a Rapid Rehousing model.

Ideally the families would use those Rapid Rehousing funds for up to about a year while they were waiting on their mobile vouchers. So far, the priority has worked for families so they've been able to secure vouchers within, say, six months. We're hoping that will continue. Unfortunately, with those two funding sources we're not able to keep the building full. Right now, we have 32 of the 36 total units utilized and so we've got a few that go unfunded while we're waiting for folks to come and choose to use their vouchers here. And that also has shifted us from a transitional housing model to what we are now calling affordable housing, and families can choose to stay however long they might want.

We're sort of in a gray area with this housing now, because we receive the OVW transitional housing money, but we don't know how long people will want to stay. Right now, we have a good dozen families that have been with us for over two years. OVW has said, "your funding can be tied to the person, and not necessarily the unit." So we fund and count families as being under that grant, if they've been with us for less than two years, and then beyond that we're in a gray area.

### ***Questions to Consider***

**1.** Does being a leaseholder versus subletting from the provider agency feel any different for a survivor?

- For survivors who are hoping to lease their own apartment, does it feel more like "being in a program" than "being a tenant" -- or is there still a sense of having made forward progress?

- Do survivors living in an apartment leased by the provider have the same sense of "ownership" and responsibility for being a "good tenant" as survivor who are directly leasing from a landlord?

If so, why ... and what can be done to enhance a survivor's sense of "ownership" of the tenancy?

- Does choosing the apartment versus being "placed" in the apartment make a difference?

- Does personalizing the apartment (e.g., choosing some of the furnishings or the color of the paint) make a difference?

- Is there a difference between how survivors feel when they are in a transition-in-place unit versus a provider-leased apartment that they will have to eventually vacate?

**2.** Are landlords more or less likely to offer a lease to a provider agency if the provider indicates that they may subsequently seek to transition the lease to the participant?

- Is it best to wait until the situation actually arises and a participant seems ready to assume responsibility for the lease, and has demonstrated that they can be a "good tenant" -- or -- is it better to let the landlord know at the outset that the program hopes to enable such a transition?

3. How important is it for program staff to meet with participants in their home? What should a provider do if the participant is unwilling to meet with provider staff in their home? Would the answer be different if the participant was the official leaseholder, and not the provider?

4. A provider that holds the lease for an apartment is responsible for its proper upkeep and for any damages caused by the participant that occupies the unit. At one extreme, such a provider might conduct regular inspections of the apartment, which might demean and even re-traumatize the participant, if it felt like a return to the kind of controlling environment she had fled. At the other extreme, the provider could fully trust the participant to take care of the apartment, and staff could instead focus on supporting the participant in addressing her priorities. Where is the appropriate balance between accountability and trust?

## 6. Participant-Leased / Scattered-site Housing

**Note:** Not all scattered-site housing is leased by participants; some is leased by providers until the participant is ready to take over the lease. Some provider-leased housing never gets turned over to participants. Not all participant-leased housing is scattered-site; there are a few programs in which participants lease units in one or more designated buildings, where they may or may not decide to remain in once they have completed the program. However, the majority of scattered-site housing is participant-leased, and the majority of participant-leased housing is scattered-site, so the two categories are combined here, for simplicity. **See also the discussion about transition-in-place housing for more information.**

### (a) Overview of Participant-Leased / Scattered-site Housing

Participant-leased, scattered-site units can be concentrated in a city or widely dispersed in a sparsely inhabited region of the state. Programs utilizing a participant-leased, scattered-site housing model typically offers participants the option of transitioning in place; OVW allow such units to start off as provider-leased, particularly if participants are unable to get a lease in their own name, due to housing-related barriers, such as poor credit, lack of landlord references, outstanding rent or utility arrearages, etc. In some cases, the transition to a participant-held lease is routine; in other cases, the landlord may have the right refuse the tenancy once program support has been phased out. As stated earlier in this chapter, HUD Rapid Rehousing grants require that program participants be the leaseholders for the duration of the HUD-funded tenancy.<sup>38</sup>

### (b) Relative Advantages and Challenges of Participant-Leased, Scattered-site Housing

#### (i) From the Provider Perspective

- On the plus side, participant-leased housing has none of the "headaches" associated with owning property (e.g., upkeep, repair, and maintenance; being a landlord; etc.), and few of the liabilities associated with leasing property (e.g., liability for unpaid rent, property damage, excessive use of utilities, etc.). However, because programs are linked in the minds of landlords to the survivors whose tenancies they financially assist, a problematic tenancy can sour the landlord on the idea of future rental arrangements with survivors associated with that program.
- The scattered-site housing model is the only realistic way to serve a large geography, especially sprawling rural areas, without forcing survivors to relocate far from the people and places they know. However, the logistics of maintaining regular face-to-face meetings with a clientele that is widely scattered are

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<sup>38</sup> As noted previously, ESG-funded rapid rehousing (RRH) grants may be used to provide rental assistance in project-based units, in which the participant is not a leaseholder, but we did not encounter examples of that approach.

challenging, and moreso than with other housing models, the primary means of communication are likely to be telephone, email, texting, Skype/FaceTime, and other such technologies.

- The more scattered the locations of participant-leased units, the harder it is for participants to get together for group activities, or to travel to a central provider location to access services offered only at that site. If participants are scattered across a city, the travel-related challenges may be significant, but not impossible to overcome; if they are scattered across one or more rural counties, the barriers are clearly more substantial. On the one hand, not all participants are interested in regularly meeting with staff, in attending gatherings with other program participants, or in accessing agency services offered at the provider's central location. On the other hand, participants might not even give such meetings or services a try, even if they might prove beneficial, if it is inconvenient to do so.
- As discussed at greater length in [Chapter 4](#) ("Taking a Survivor-Centered/Empowerment Approach: Rules Reduction, Voluntary Services, and Participant Engagement"), the relationship between a participant and the TH program advocate/case manager/services coordinator is central to the success of services and to participant engagement, to the extent that a participant needs and wants more than housing assistance.

Although technology provides an increasing number of alternate options for communicating with one another, these options are not necessarily a substitute for face-to-face meetings, at least at the start of a relationship, when building mutual trust and rapport is so critical. The greater the logistical challenges of coming together, the more time and energy staff need to invest in creating opportunities for that kind of relationship-building face-to-face communication.

Other, more seasoned participants can be a program's most effective ambassadors, as well as providing important peer support and even mentoring to newly enrolled survivors. The harder it is to bring participants together, the less likely those relationships are to develop, depriving participants of the opportunity to give and receive peer support, and preventing newcomers from hearing third party recommendations about program staff and the services and support they can help participants access.

- Sometimes, visual cues provide more information than the words that people speak. To the extent that staff increasingly rely on email, phone calls, texting, or Skype/FaceTime to connect with participants, they are likely to miss non-verbal signals that things may not be going as well as might be hoped. Staff might, for example, fail to recognize signs of a participant's declining mental health, signs that her ex-partner has resumed abusive behavior, or signs that a participant is struggling to connect with her child. Staff might also not find out about tenancy-related issues until they explode and cost the participant her housing and cost the program its relationship with the landlord.
- Unlike in a congregate or clustered housing program, participants in scattered-site housing do not tend to live near each other, and so, most of the issues that arise when program participants live in close proximity and get "in each other's business" are avoided (although, if the program regularly convenes group meetings and activities, some of those challenges may arise). Similarly, when participants live in scattered locations, individual biases vis-a-vis race, ethnicity, language, religion, sexual preference, gender identity, single or parenting, involved in prostitution or trafficking, lifestyle choices, etc. are not likely to be any more or less of a source of conflict or tension than they would be in mainstream housing.
- Participant-leased scattered-site housing is probably the best fit for a survivor with a pet. Although pets can be an important source of emotional comfort and stability for a survivor of domestic or sexual violence, it could also become an additional source of conflict in congregate housing. While there is no assurance that the units owned or leased by providers using the clustered housing model would accept participants with pets, the scattered-site model allows participants to find housing that will specifically allow them to keep their pets.

***(ii) For participants, participant-leased housing:***

- On the plus side, having her own apartment can be a very affirming and empowering experience for a survivor who has come out of a controlling relationship with an abusive partner who told her she would never be able to manage without him. Scattered-site housing is the most independent-feeling housing arrangement, the arrangement that is least subject to program rules and requirements, and in fact, the model that feels the least like being in a program. On the one hand, for participants who being able to make their own schedule and organize their lives and their surroundings as they see fit, having their own apartment can provide a tremendous boost of self-confidence. On the other hand, if participants are not yet ready to create their own structure; if in the absence of such structure, they are prone to feelings of isolation or loss; and if they don't have the emotional energy to invest in becoming integrated in their new community, scattered-site housing could be draining and demoralizing.
- On the one hand, having the freedom to choose the apartment she and her family will live in -- what it looks like, where it is located, how it is set up -- can be empowering. On the other hand, facing a difficult housing market and being turned down by landlords -- because of poor credit, lack of references, erratic income, etc. -- can be discouraging and demoralizing, and force a survivor to compromise on her aspirations, so that she ends up in an apartment that isn't as nice as she had hoped, and isn't located in as nice or convenient an area as she had intended. The less convenient her housing is to the places she needs to access (employment, the daycare provider, her child's school, etc.), the more her time and energy will be consumed by travel logistics. (Participants who want to move to some other location at least have the security of knowing they can remain where they are until they have a better alternative.)
- Unlike living in a congregate or clustered housing program, participants in scattered-site housing are not likely to be in close proximity to other program participants, and so, most of the issues that arise when program participants live in close proximity and get "in each other's business" are avoided (although, if the program regularly convenes group meetings and activities, some of those challenges may arise). Similarly, when participants are scattered about, differences vis-a-vis race, ethnicity, language, religion, sexual preference, gender identity, single or parenting, involved in prostitution or trafficking, lifestyle choices, etc. are not likely to be any more or less of a source of conflict or tension than they would be in mainstream rental housing.

While many program participants appreciate the privacy and anonymity of scattered-site housing, many others may experience the isolation and lack of community that it engenders. To the extent that they are largely disconnected from other program participants, it is up to participants in scattered-site housing to create and leverage their own support networks, either re-connecting with friends, family members, and community groups that were part of their lives before they fled domestic violence, or finding ways to integrate themselves into their new community -- which can be difficult and emotionally taxing.

- On the one hand, if things go well, making her own decisions about how to use her time, how to organize her household, and what to spend her money on can build a survivor's sense of self-efficacy. On the other hand, if things go poorly, a survivor can fall prey to the kind of negative self-talk her abusive ex-partner encouraged, and can suffer mental and emotional health setbacks. The more support a survivor has while she is in her own apartment, the more opportunities there are for members of her support network to interrupt and arrest any downward spiral. The more isolated a survivor is, the more likely such a downward spiral is to go uninterrupted, and the more vulnerable the survivor will be to the effects of depression, anxiety, and PTSD, etc.; the more likely she is to relapse, if she has a history of substance dependence; and the more tempted she may be to return to the life she left behind, which, provided some essential elements of support and meaning, even if it exposed her to violence and abuse.
- On the one hand, successfully managing a tenancy in her own name, even if she is receiving significant financial assistance from the program, is a great way to re-establish credit and credibility with future landlords and employers. On the other hand, survivors who need more life skills support than they are

getting -- whether because their need went unnoticed, or because the logistics of seeking help were too daunting -- could wind up digging a financial hole that they are unable to climb out of, even with help. Several providers spoke about the risk that survivors who have their own apartment, could lose the sense of urgency for finding the employment they'll need to sustain housing once program assistance ends.

- A participant-leased apartment is ideal for a survivor who is ready for that level of independence and ready to invest in becoming integrated into a new community or re-integrating into the community she left behind, minus her abusive partner. For a participant who is at risk of further abuse or violence from her (ex-)partner or his allies in the community, the more isolated her housing, the greater the risk.
- On the one hand, survivors with leases in their name are entitled to the full complement of tenants' rights and Fair Housing and American with Disabilities Act protections. On the other hand, in order to fully assert those rights, a survivor might need the help of an experienced advocate. In the absence of face-to-face communication, it might be hard for an advocate/case manager to discern that need, and unless the survivor understands her rights, she might not know how to ask for the right kind of help.
- A (Rapid Rehousing) program that requires participants to obtain a lease in their own name may be unable to serve survivors whose housing credentials -- income, credit, landlord references, etc. -- are not good enough to satisfy landlords with decent rental property. Instead, the survivors who will be able to enroll in the program (i.e., that are able to secure tenancies) will be those who are most "attractive" to landlords (i.e., good income prospects, positive housing history, good credit, no rent or utility arrearages, no record with the criminal justice system, no problem proving status as a legal immigrant, etc.).

### **(c) Provider Comments about Advantages of Participant-Leased / Scattered-site Housing**

**Note:** The section discussing the Transition-in-Place model includes many more quotes about the advantages and challenges attendant to participant-leased housing.

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) For our rural service area, the logistics of scattered-site made more sense than congregate housing. And part of it was financial: I didn't want our agency to be the landlord. I didn't want to get into that part of it. I didn't want to be holding a client's money. For accounting reasons, I didn't want to be the one that the security deposit would be coming back to. And I guess I'm old school, I didn't want to be the landlord.

Because our program does not own the units, because all the units are scattered-site, the mix of families and individuals we serve depends on who needs help, not the size of units available. It's the client's responsibility to find the apartment, and she will be the one to actually sign the lease and be responsible for everything, even though our agency writes the check to the landlord or the utility company.

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(#02) Scattered-site housing provides a level of program safety, because you don't have all the victims concentrated in one area. So if one individual decides that she wants to reunite with her partner at some point, it's not jeopardizing other clients.

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(#03) For clients who have been in shelters, who are chronically homeless, a community-based, scattered-site model works better because it breaks them out of the mindset of chronic homelessness. When you place clients who have a long history of homelessness in the on-site transitional housing, they don't do as well as when you place them out in the community and say, "You can do it. We'll be here to help you." Instead of getting to know everybody in the on-site program and then moving out into the community, where you have to start all over again, with the scattered-site model, you're already there.

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(#04) The area where we are located is a summer destination, and like many summer destinations, it's very hard to find affordable year-round housing; because even people who are willing to rent in the winter time, their prices go through the roof in the summer. We didn't think that purchasing a building would be the most effective use of our resources, because we are in a remote part of the county, and we doubted that clients would be able to find gainful employment here. And we don't have a lot of good public transportation. And our families might know better than we do where the safest most affordable places in the county are to live, and where they have a support network. Those are all reasons why we have people choose where to live.

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(#05) We have six OVW-funded units and ten HUD ESG-funded units. Participants find their own apartment, sign the lease, and receive full rental assistance for the first six months, assistance with half the rent for the next three months, and pay the full rent themselves the last three months. For the OVW-funded units and five of the ESG-funded units, we also pay the first three months of utilities. With the other five ESG-funded units, they don't get three months of utility assistance, but we do pay their utility deposit; with the OVW-funded units and the other five ESG-funded units, they have to pay their utility deposit.

Part of the reason we chose this approach was funder-driven. Part of it was that we didn't want to own the buildings. We didn't want to be the landlord. We didn't want to be on the lease and be responsible for that lease if anything happens. And, we think it's better that participants can stay in their units after we're done.

From a participant perspective, if we control the lease, they're still not fully in control of their own lives, and we didn't want to become part of keeping them trapped in the Power and Control Wheel. They need to learn how to be independent, because coming from DV situations, many participants don't have that skill. In addition to gaining that skill, being on the lease can improve their credit score when their rent is paid on time.

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(#06) We have a question on our application, "do you want a scattered-site unit or do you want communal living?" and we look at what we have available. If a client has less income to sustain themselves and they're interested in our agency-owned clustered site, because all utilities are included, they may work out better in that program. If they have decent enough income to sustain a tenancy on their own, we start them off with six months of subsidy in their scattered-site unit. If it looks like the individual needs more support we'll extend to a year and they can stay up to two years. All the while, we're providing them case management and financial support. The goal is at the end of our support they'll be able to sustain the apartment on their own.

We try to be clear that this is not long term support, so we help them make decisions around what would be affordable on their own, so that we're not setting them up for failure. I would never suggest that somebody take an apartment that is \$1,100 if they only have \$700/month of income. But if they have monthly income of \$700 to \$800 and they're looking at a \$700 or \$800/month apartment, that's a little closer. Yes, it's all of their current income, but with support and case management, they might be able to increase their monthly income to then be able to afford that apartment going forward.

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(#07) Participants are expected to contribute 30% of their income towards their rent. They pay that directly to the property manager which is the same amount that they'll be paying if they live in subsidized housing. We pay the other portion of their rent and we pay utilities on top of that. If someone doesn't have income, they're fully subsidized. We don't have any income requirements in the program. If someone's income changes, if they lose their job or have an interruption in benefits, we recalculate and pay the rest of their rent.

We chose the scattered-site model with rental assistance to help participants lease units in their own name for both pragmatic and philosophical reasons. It's important to us that people have a choice of where to live. We've seen that the more choices people have in where they live, the longer that they're going to stay in housing and the greater investment they have in that unit.

We decided not to use the master leasing model because we wanted to provide participants an opportunity to build good rental history, and to take their housing into their own hands. When the unit is in our name and the participant is subletting from us, she is a little removed from that sense of ownership and responsibility, which creates a greater reliance on the housing program than is sometimes necessary. Most people want to be in their own housing, we want to give people that opportunity. Also, when the participant holds the lease, if something happens in their relationship with our program -- if we have to end the relationship or if they choose to end the relationship -- they don't automatically lose their housing. And they always have the option to keep the unit if they can afford it, which they wouldn't in a master leasing or congregate situation.

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(#08) Our model offers the benefits of a scattered-site model and opportunity to be part of the community of program participants. I personally don't like the feel of a DV unit, where all the battered women stay; I think there's some dignity in being able to blend into the larger community. In their own scattered-site apartment, participants have more anonymity and confidentiality, and can have a fresh start. They choose where they live just as if the DV had not occurred, or as a reflection that they've healed and moved on.

Although we're a scattered-site program, our OVW and HUD funding sources require participants to live within the metropolitan area or the county, respectively, so people don't live too far away from our program site. So we have the luxury of being able to create a community in our program. People have the choice to come together, and to support each other with babysitting, or in other ways if they choose, outside of services. For some it's harder than others, but it feels like our approach allows organic things to happen.

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(#09) Scattered-site units are wonderful because not everybody needs the level of service in our onsite program, doesn't have as many housing barriers as in our onsite program, or maybe doesn't feel unsafe going back out into the community. And so they may not want to live onsite in our campus with our shelter and our resource center, or in a small community exclusively with other survivors, or behind gates. So for them, it's a blessing. Scattered-site units give us the opportunity to help those with fewer barriers, who are only looking for assistance in linking up with other safe housing in the community -- survivors without enough income to afford fair market rentals right at that time, or who need some level of support services, but who really value having access to other community supports and feel safe enough to go out on their own.

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(#10) (Not a current OVW grantee) In addition to the metropolitan area, where we have a congregate transitional facility, we serve six pretty rural surrounding counties. We have a rapid rehousing program in those outreach counties that serves survivors who typically don't want to come to our urban emergency shelter. They're more comfortable getting out of their situation and moving into their own apartment. The clients get to pick where they want to live, and what type of house -- an apartment or a rental house. It's their lease. And they come in with the expectation of roughly six months of assistance. After six months, they're still going to receive case management, but, they're working towards being able to take over their rent and utilities.

We also partner with a shelter in the outreach counties to do a CoC transitional housing grant - basically leasing, not rental assistance anymore. With the new CoC rules, we can't assist clients who get leases in their own name. The leases have to be in an agency's name, and then we can sub-lease to the client. Since our agency is not in a position to do that, we partner with another agency. So, we're still able to refer clients. If someone is not able to work now, and maybe needs a little bit more time to get things in order, they may be better served in the CoC leasing program, which offers longer assistance than the rapid rehousing program.

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(#11) We have two programs, a scattered-site, transition-in-place program funded by an OVW grant, and a two-year program that utilizes four units in a building our agency owns. Applicants do not need an income to qualify for the site-based program; however, they must have the ability to pay increasing amounts of rent and

to achieve a “livable income” to participate in the scattered-site program. Financial assistance for the scattered-site program lasts a minimum of three months and a maximum of 24 months. Participant contributions towards rent start off with an amount based on their income at program entry, and we eventually transition to where the participant is paying the entire amount of rent. The amount that we pay isn't based on any formula; just on what the participant needs help with. But, even if the client is paying 100% of their rent, they remain eligible for all the other services for the full 24-month period, as well as for a minimum of three months of follow-up.

Because it is a scattered-site program, the OVW program can serve survivors that may not be appropriate for shelter: someone whose mental health issues – PTSD, bipolar disorder – make it difficult for them to live in a congregate situation, someone with a pet that is a significant part of their life that they cannot part with; an older survivor who feels that a communal shelter "is not for someone like me;" someone with a dependent who wouldn't fit well in a congregate environment (e.g., a 19-year-old son). We had the opportunity to work with an older woman who felt like shelter wasn't for her. She had a lot of mental health issues, depression and anxiety, and she had a dog. The OVW-funded scattered-site program was really a wonderful thing for her because she needs to be safe just like someone else. Working with her, we came to understand that pets are a significant part of her life and it would be a great loss to her if she had to part with her animal. She would just isolate herself if she didn't have the dog, but because the dog has to go out, it got her to go out, so the dog helps with her mental health. The scattered-site program is a great option for survivors like her.

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(#12) The scattered-site model has worked well, because we serve a very large county, and a scattered-site approach allows a survivor to seek housing wherever she feels comfortable living, whether that's back in the community she came from, a community that's close to where she works, or a new neighborhood or community -- she can make that choice. However, what historically has been an up-to-24 month model is shifting to a 12-month model, because that's how our HUD funding has switched. Our organization feels very strongly that that's not the best model for DV survivors. So our board is making a commitment to look into some alternatives, like doing a capital campaign, so we can build something or try to acquire our own property, so that a percentage of our program units can still be available for up to 24 months. Currently, the only units we have where a participant can receive up to 24 months of assistance are the 10 project-based units that we own.

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(#13) One thing we do is try to really honor the survivor's wishes about where she might want to live. Part of the beauty of a scattered-site rapid rehousing model is that you're not confined to one building or one neighborhood. Certainly there are some neighborhoods you can't afford and can't support somebody moving into, but we really try to follow the survivor's ideas about where she wants to be -- sometimes it's because her cousin lives in that part of town or there's a school that she really wants to connect her child to; sometimes she already has an idea of the kind of community she'll be able to build once she moves there.

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(#14) All our housing is scattered-site with independent landlords. Most of the units are off-reservation, although they haven't always been. It's just more how the housing market is; there are not a lot of places available on the reservation, and reservation housing seems to be more expensive, so not necessarily accessible. We target neighborhoods that are safe yet affordable. When we're looking and they're deciding what locations would be in their best interests to live, we look at the school resources, if they have children; their transportation needs; if there's a disability; closeness to family; whether the abuser or abuser's family is in the community. And they make a decision about what's in their best interests in terms of location.

And then, we organize a payment arrangement with landlords in the area. The client's name is on the lease for two reasons: (1) It builds the rental history that people need in order to get a rental reference; and (2) If they're not listed as the main person on the lease, disability rights and other tenant's rights sometimes don't

apply to them. So the leases are in their names, but all the billing is in our name. They have control of their household, and the landlords understand our program and safety -- that's all in our name. The participant has the right for their name not to be disclosed. So any financial information would be in our name.

At least for the first three months, we cover the full amount of rent and utilities, because that helps people to get established. And then, if someone is employed and has a source of income, we'll link them with local budget counselors who can help them establish payment plans on any outstanding debt. The goal is to reduce their debt, build savings, and start taking on some of their housing costs. Someone might, for example, take over their water bill and then take over their utilities, and then a portion of the rent. So by the end of the two years, they're ready to take over the full payment for the place if that's what they want to do.

#### **(d) Provider Comments about the Challenges of Participant-Leased / Scattered-site Housing**

**Note:** The section discussing the Transition-in-Place model includes many more quotes about the advantages and challenges attendant to participant-leased housing.

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) Rapid rehousing is a little more challenging than site-based. For one thing, there's a lot of drive time for the case managers, and that's an expense to the program. It's harder to build community when you don't have a meeting place that's accessible to everyone. It's easier to build that in a congregate transitional housing program, because we have group rooms and those kinds of things.

We have universal eligibility requirements for all our rapid rehousing: we won't take someone with very serious barriers. Rapid rehousing is for someone with mild to moderate barriers. If someone in our shelter has multiple evictions<sup>39</sup>, an active addiction, and other issues, she won't go to rapid rehousing, because she's not ready for it and won't be successful in it. We refer survivors with more serious barriers to our transitional housing program, and provide services accordingly.

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(#02) The vacancy rate for units here is only 2%. So even when someone gets a subsidy, finding a unit where they can use it is a huge challenge. Because there is such a low vacancy rate, landlords can be discerning in trying to find people with good credit, great landlord references, and no criminal history. Trying to develop a relationship with landlords is a goal for us, and that helps somewhat. It can be challenging, and if something goes wrong with a tenancy that we helped place, the landlord doesn't want to work with us anymore.

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(#03) I have mixed feelings about our scattered-site program. I like scattered-site because it allows people to have their own space. But there's also a piece about being in a community that they are missing; people don't want to be alone and shouldn't be alone. On the other hand, one of the concerns I've had with the congregate housing is everybody looking at everybody else -- for example, wondering why they're not getting some assistance that another participant is getting -- that can take away from their focus on their own goals.

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(#04) We're often able to serve more people than we projected because some people don't need 12 months. We use a scattered-site transition-in-place model; leases are in participants' names; and per HUD requirements, participants pay 30% of their adjusted net income towards rent and utilities; the money goes directly to the landlord for their rent. We rely on our relationships with landlords to house participants that may have barriers, like criminal history, evictions, debt. What we see more and more is that even when we

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<sup>39</sup> Multiple evictions may reflect the abusive partner's behavior, rather than the survivor's inability to sustain a tenancy.

guarantee the rent, landlords are just saying no; they just won't give people a shot. And the amount of rent that landlords are charging has increased significantly in the past year, so that it's far beyond the Fair Market Rent that we can use HUD funds to pay for. That also significantly limits our housing placement options.

Just being stably housed in their own apartment -- so that they can establish routines and schedules and get kids back in school -- is a huge part of the healing process. And participants are potentially building positive rental references, and since they're only paying that 30% of adjusted net income, they may be able to work on whittling down some of their debts. For some people, though, because of the trauma they have experienced, or safety issues that are still going on, being in their own apartment alone can feel very isolating and scary.

We've talked about how fabulous it would be to own a big old apartment complex so we could house people with the highest barriers and just give everybody a shot. We don't have the financial ability to do that now.

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(#05) In order to participate in our scattered-site transitional programs, a survivor has to be able to find and lease an apartment in their name. Our agency doesn't do third party leases. We use an empowerment model, and choice is really important. So, where someone wants to live is totally up to them, except that our OVW and HUD grants impose geographic limitations, and it's a really expensive county to live in.

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(#06) We provide 14 units annually for survivors through a HUD transitional housing grant covering the same service area that the OVW grant covers. We try to make sure that our forms and processes are similar for both programs. When the HEARTH Act took effect, we had to change our model, because HEARTH Act language did not allow nonprofits to administer HUD rental assistance, so we had to convert from a voucher style program to agency-leased properties. We had to identify properties and work with landlords to get leases in our agency's name for those 14 properties, so they are not transition-in-place at this time.<sup>40</sup>

### **Questions to Consider**

1. Some providers and funders restrict where participants can live and still be in the program and receive rental assistance; even so, participants in scattered-site apartments are likely to be further from one another and from a central program location than participants in units owned or leased by providers.

- How important is it for staff to maintain at least occasional in-person contact with participants?

- How important is it for staff to develop an in-person relationship with survivors at the outset of their participation in the program?

- What can program staff do to allow these scattered-site participants to at least occasionally experience the benefits of group activities and peer support? What if participants have no interest in such participating in such activities or meeting other survivors in the program?

2. How important is it for program staff to meet with participants in their home? What should a provider do if the participant is unwilling to meet with provider staff in their home? Would the answer be different if the provider was the official leaseholder, and not the participant?

3. The participant-leased housing model allows participants much greater choice in where they want to live, provided they have the income and "credentials" (e.g., good credit, landlord references, clean record, no arrearages, etc.) to compete in that housing market.

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<sup>40</sup> Pursuant to the HEARTH Act and HUD regulations, only Local Housing Authorities (LHAs), states, and jurisdictions can administer rental assistance for **Transitional Housing** projects. ([See HUD FAQ #1527 - July 2014.](#)) Language in the 2014 Appropriations Act allowed non-profit providers to administer rental assistance for **Rapid Rehousing** projects (but not TH projects), temporarily trumping HEARTH Act language which allows only LHAs, states, and local jurisdictions to do so. Until the HEARTH Act is permanently amended, this is a year-to-year permission. ([See HUD FAQ #1525 - July 2014.](#))

However, some survivors don't have the income or "credentials" to lease housing in an area that they prefer (e.g., for safety reasons, for proximity to informal supports, for proximity to a school, health providers, shopping, employment, etc.),

- In such cases, is it better to arrange an agency-leased apartment in the area that the participant wants to live, or is it preferable to afford participants the opportunity to lease their own housing, even if it has to be in a less desirable location, so they can build their tenancy record, and experience the sense of empowerment that comes with having their name on the lease?

- If the only OVW-funded TH program serving an area also receives HUD Rapid Rehousing funding, so that the program can only provide housing assistance to participants who hold a lease, what options are available to a survivor whose housing history, credit history, and sketchy employment history make it impossible for them to find a landlord who will offer them a lease?

## 7. Congregate Housing Model

See the discussion about provider-owned and provider-leased housing for additional considerations.

### (a) Overview of Congregate Housing

Congregate housing is almost always provider-owned or provider-leased and temporary. The one exception that came to our attention was the [Oxford Housing model](#) mentioned earlier in this chapter, and utilized as a source of permanent housing in Clackamas County, OR, as described in the [Domestic Violence Survivor Housing webpage](#) of the Metropolitan Alliance for Common Good.

### (b) Relative Advantages and Challenges of Congregate Housing

#### (i) From the Provider Perspective

- Congregate housing is more staff intensive, typically involving extended presence by onsite staff, at least during daytime hours.<sup>41</sup> In addition to providing advocacy/case management/service coordination, staff support the day-to-day operation of the congregate household, and help facilitate resolution of interpersonal conflicts that develop between participants.
- Because the building housing a congregate facility is typically provider-owned or leased for an extended period of time, providers can invest in enhanced security and on-site space for program activities and offices where staff can privately meet with residents.
- Because staff are routinely onsite, they are likely to see and at least informally connect with residents most days; as a result:
  - There are regular opportunities for the kind of casual conversations with participants that help build trusting relationships;
  - It is relatively easy to arrange meetings with individual participants and easier to organize group activities (e.g., workshops, support groups, recreational activities, etc.); if activities do not take place onsite, it is relatively easy to provide childcare, because all of the children are onsite, and easier to provide transportation to the locations where activities are held, because participants can be transported from a single location.

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<sup>41</sup> The Oxford House model, mentioned above as a participant-leased permanent housing arrangement, is notable for its lack of staffing; residents in the house are responsible for their own governance.

- Staff are likely to notice both positive changes (e.g., more energy, more attention to self-care, etc.) and negative changes (e.g., warning signs of depression, substance abuse, trauma, abuse, etc.) in participants. Such changes might go unnoticed if participants lived in more remote locations and if communication were largely limited to phone, email, texting, etc.
- Access to childcare during scheduled activities is relatively easy to arrange, and access to informal (peer-furnished) child care is possible when participants have appointments they need to attend.
- If units are co-located with shelter,
  - There's an opportunity to leverage staff/survivor relationships developed while the survivor is in shelter, so that TH program staff are not starting from scratch when a survivor enters their program.
  - The cost of the facility and program staffing are shared between the shelter and the TH program.

***(ii) From the Participant Perspective***

- Provides easy access to staff and peer support, especially important in times of crisis. Provides a sense of community for survivors who might not have access to a community of friends and family members on the Outside
- Participation in group activities requires only a modest commitment of time and effort, since logistical challenges (e.g., childcare, travel) are minimal.
- The interpersonal conflict that arises when so many different people share living space can be stressful and draining. Participants experience a lack of privacy, and often feel watched and judged by their peers. It is not uncommon for participants to be comparing the level of assistance they received with the level of assistance that their peers received. Participants who feel subject to prejudice, intolerance, or hostility could be re-traumatized, even if the process of resolving disputes is intentionally affirming.
- Congregate transitional housing may feel like a continuation of shelter, instead of like moving forward towards independent living in a community; more "transitional" than "housing."
- If participants need a little extra time before they can finalize arrangements for housing, for a voucher, for employment, or for a VISA, it's easy for a TH program to arrange that extra time in a congregate facility than in an apartment that is subject to a lease.
- If units are co-located with shelter:
  - Participants have the opportunity to continue working with shelter staff with whom they have already developed trusting relationships.
  - Participants have full/easy access to shelter-based programs (e.g., children's programming, therapist, support groups, child care, court advocacy, etc.)

**(c) Provider Comments about the Advantages of Congregate Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) The on-site model gives you more access to a client who needs more encouragement, who could benefit by more participation in programming, who needs more intensive services. It gives you more opportunity to encourage that participation, and avoids the barriers to participation that exist when folks are scattered in the community. Undocumented victims do really well in an in-house program because they don't have to prove their citizenship. When their income source dries up, usually the program is more willing than a private landlord to work with them. And it's safer for clients whose abuser is stalking them: It's harder for a client in

their own scattered-site unit to deny an abuser access; whereas if he shows up at a more traditional on-site model, then someone else can deny that access. So, there's that extra element of safety for clients.

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(#02) Our transitional housing program has 10 units for families or individuals, whoever needs the housing. It's funded by OVW and HUD grants. The program is co-located with the domestic violence shelter and consists of communal living where the bedrooms are separate units, but the living room, kitchen area, play room, and bathroom are communal; so it is congregate, communal living. Staff in the shelter are here 24/7, and they're cross-trained to be able to provide support to both shelter and transitional housing participants. If they need any DV program services, they can access any domestic violence-funded services in the shelter. Participants have to move out when their participation in the program ends.

Participants do not sign a lease or occupancy agreement; they pay rent on a sliding fee scale, based on family size and income. It's set up that way so participants understand the need to pay rent when they move out into the real world. If they lose their job or are laid off, their rent obligation will go down; if their income goes up, then typically their rent will go up a bit. If they need it for something specific, like school tuition, participants can get back their contributions towards rent upon program completion.

It's really difficult in our area to find safe, affordable housing, so I wouldn't know how to start a transition-in-place program. And it seems like a lot of landlords in our area don't want their tenants to sign leases.

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(#03) We have a 60-bed HUD Continuum of Care-funded transitional housing program for families; those 60 beds are actually part of our emergency shelter. A stay in the shelter is up to 30 days. Anything after 30 days is considered transitional. They stay in the same unit; it's just a different source of funding. The units are set up like a dorm: two rooms on either side of a bathroom. Two families might be sharing the unit, or it might be one family, depending on the size of the family. We're able to offer every client the right to apply for an extension beyond the initial 30 days, which would put them in our transitional program.

We look at is how far the family has gotten in accomplishing their short-term goals, and have they been working the program? Have they been utilizing the support group? Have they been working with their advocate? Have they been accessing resources? Are they addressing the barriers identified in case management? So if there's a client who's gotten a job and she needs another month before she can save up for an apartment, we're going to go ahead and give her the extension. Most people stay a year.

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(#04) We have 16 transitional beds that are co-located in our emergency shelter; it's community living, so there are four to six beds in each room. If someone in the emergency shelter wants transitional housing they can just extend their stay in that room. They don't physically move to a different bed, they just extend their stay. We also support some scattered-site apartments, depending on how much we have left in the budget. The participants in our co-located program are usually people that, for whatever reason, can't find offsite housing. They have too many evictions or other barriers that keep them out of scattered-site housing.

We also support some scattered-site apartments; the number of units depends on how much we have left in the budget. Right now we have four apartments. They're leased in the survivor's name, and we subsidize their rent for 6 to 24 months, and they can transition-in-place. I would encourage programs to use a scattered-site model over a co-located model. I think it's very hard to live in community living for a long time. However, implementing a scattered-site model requires a lot of relationships with landlords willing to take a chance on survivors with poor credit histories and that sort of thing, but knowing we'll guarantee the first six months and provide supportive services. You need the funding to subsidize the rent, but I think it's a better model.

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(#05) Because of the trauma that a lot of these ladies have experienced, I like the congregate model. I feel that participants really help each other. It's nice for them to have the support of someone else who's been through something similar. They collaborate and watch each other's kids and one will have a car and one won't, I feel like that's really powerful. I think having support and not being alone is huge for these women.

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(#06) Having an onsite program that we own has been such a blessing, and is one of the reasons why I would like to see us develop our own permanent supportive housing program as well. Financial abuse has a huge part to play in those rental debts, the property damage, evictions, the poor work history, lack of income, and even criminal history; having our own housing enables us to serve clients whose numerous barriers might prevent them from finding housing. And so our own transitional housing is one of the few places where we can serve survivors who have multiple felonies on their criminal history. And they're able to access safe, stable housing very quickly through our transitional housing. Their choice is between staying with someone, returning to an abuser, or transitioning to our onsite housing, where they have time to work on other options.

Our on-campus housing is also helpful for undocumented survivors: getting a U-visa can be quite a lengthy process, so having access to some type of housing and safety and support during the two-year-or-longer application and waiting period might mean not having to return to that abuser. It's especially valuable for serving survivors whose abusers are just not willing to leave them alone. When our resident manager gets threatening phone calls or the abuser is waiting outside our gates at the bus stop or doing drive-bys, we can work with our own security and the police department, consider protective orders and police reports and occasionally have a survivor return to the shelter temporarily without losing their apartment, in order to help maintain some sense of housing stability, which is nearly impossible when it gets that bad in private housing.

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(#07) (Not a current OVW grantee) Sometimes we don't know until after somebody's already in the program that they are at risk of stalking, but if we know ahead of time, I would recommend placing them in our congregate building, because that building is staffed five days a week, and it's a locked, secured facility, with surveillance cameras. If they want to be in one of the outreach counties, we might be okay with that, as long as they're not in contact with the stalker. They might be able to flee the city and get some privacy. We've helped clients get alarms on their doors, security systems, things like that, if they felt they needed them. Or, if the perp starts to call again or maybe shows up, we might get flood lights. We've got a little bit of money to help clients stay safe and do those things if they need to.

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(#08) We rent a building from the Housing Authority for a very minimal cost, building on a good partnership that we've developed over the years. There are seven bedrooms, each with its own bathroom, that we look at as individual apartments, and then there is a shared living room, kitchen, and support group room. We transitionally house and provide services there for an average of 10 households with and without children at any time. We have a two-year stay limit, but would not ask anyone to leave if they didn't have a situation to move into. We also have a transition-in-place component to our program, which currently serves about 10 women and their children in scattered-site apartments. Our transition-in-place program tends to serve survivors that already have a job or are already enrolled in school, or are a little more ahead-of-the-game. We refer people from shelter to the congregate site if they need longer-term help to get on track with jobs, etc.

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(#09) (Not a current OVW grantee) I think our facility-based model is far superior to the transition-in-place model. We take people into the program who need on-site services and who tell us, "I don't know what I would do if I had to live in an apartment by myself. I just wouldn't be able to cope." They need the help with the children, English language interpretation, someone to sit down and show them how to use a computer to pay bills or search the internet. They need the kind of help that you just cannot get if you're isolated and living

in an apartment on your own. Particularly in terms of trauma and people who are depressed and panicky; a negative interaction with the landlord would just send them into a total tailspin. I just think that on-site traditional, facility-based programs are so important, but I also recognize that they are really expensive interventions, so that many agencies are getting out of facility-based work, and trying to make use of private housing stock and the rapid rehousing transition-in-place type model.

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(#10) We have two 5BR homes for single women and two 5BR homes for women with children. We own one of the homes and lease the other three. One of the homes is geared towards female vets, but the thing all the women have in common is they're all battered or sexually abused and have substance abuse issues. They could be trafficking victims; they could be women who came out of prison; they could be transgender; we don't say we only work with this or that population. Each home has four client households and a house manager who's been through our program or a similar program. The women can stay for two years. These are big, really nice homes in really nice areas; we avoid run down neighborhoods. At one of the houses for single women, we have a swimming pool, and we have barbecues and bring all the women over. We've used this model for years. The grants pay for some of it, and the women, once they have an income, pay 25 to 30% of their income towards housing costs. If they participate in our job training program that's all waived, and we give them a \$100/month gift card to a store of their choice, a gas card if they have a vehicle, or a bus card.

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(#11) The domestic violence shelter model is all about fleeing and going to confidential locations. And I think there's a significant portion of clients who don't need to go to a whole new community, who don't need to go into hiding, but they need really intense, supportive services in a congregate environment. Folks who may really struggle to live independently, they need that community, they need that consistent support, but they don't need to go into hiding to get it, and our shelter system is not built for that type of client and I think there are a lot of people going to domestic violence shelters, confidential shelters, who don't necessarily need to go into hiding, but they're homeless or they need wrap-around supportive services to be successful, and that's the only model for them to get it right now.

Our ideal program would be a small congregate setting, with staff with expertise in addiction, and training on complex trauma, because that's what we see — many of the clients we serve have not only experienced this domestic violence, but that violent relationship compounds life traumas that they've previously experienced. For many clients, they report it being their whole life. And the needs of those clients are tremendous, and we want to talk about getting them jobs and getting them GEDs and life skills training, and that can't start for many of these clients until they've got their mental health needs addressed and that can be very resource-heavy and we would want an environment that could really support that in a way that we can't right now.

#### **(d) Provider Comments about the Challenges of Congregate Housing**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) There are definitely challenges with communal living. Participants have to share an apartment for a year with someone they don't know, who may not wash their dishes right away, or whose stuff may take up more of the living room, or who may take really long showers -- some of the same things that might be frustrating about living with family members. The only difference is your roommate isn't your family so you can't just hash it out and still know you love one another. Participants understand that the tradeoff for roommate challenges is the extended time in the transitional program, during which they receive very comprehensive services.

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(#02) I think that living alone and being responsible for your own unit is better for them than living in a group home. That's a difficult transition for anyone unless you're coming out of a college dorm, and it doesn't

prepare you for the reality of living independently. I would say living in a unit of your own rather than a congregate facility is a better, more realistic transitional step for most people.

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(#03) Our program's transitional housing is congregate with private locked living spaces, so one of our challenges is assisting people in living communally, even though people have their private space. People come from different backgrounds, have different expectations on how clean or how loud their living space should be. Helping people communicate respectfully about problems is a big part of what our case manager does.

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(#04) (Not a current OVW grantee) Our program serves tribal members in a rural part of the state. There's not much housing around here, but with funding from two different grants, we were able to lease a house with two 3BR apartments from a private owner in a town about 30 miles from the reservation. He paid the electrical and water, and charged us a flat rate, which worked out better for us financially. We used that housing to provide participant families with rent-free housing for six months to help them get on their feet, i.e. if they needed to get a job, or needed to save up some money to get a permanent place. The majority of our participants did find housing in the area. But the six months was not set in stone. If someone needed a few extra months, we could be flexible.

Tribal staff work weekdays, 8am to 4:30pm, with weekends off, and a lot can happen overnight and on weekends. Monitoring the goings-on in that house was quite challenging, especially because the house was in a remote area, and we don't have police that can do drive-bys. Safety and security were major issues; there were thefts, parties, and one of victim moved the perpetrator in with her. She knew our staff hours, so of course, every time a monitor went to check up, he was never there. But he was there on the off hours and on weekends. We ended up having to evict her. If we were to run a program again, I think it would be safer to have staff on site 24/7. I would also want participants to have longer than six months -- at least a year -- because six months may be enough time for somebody with a good job to save money. But a few participants didn't have jobs, and six months was not enough time to find a job, and get back on their feet.

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(#05) Our program provides transitional housing for older victims of domestic violence, sexual assault, and/or stalking. We own a 3BR house that we renovated. It can accommodate three women in a roommate situation: people have their own bedrooms, and share the kitchen and common areas. We serve men, but not at the house because it's not coed. We have to do some pretty good screening because it's such close quarters; we have to make sure that the women who live there are able to take care of themselves because we don't provide care. It's not a staffed house. So there's nobody there overnight or anything like that.

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(#06) (Not a current OVW grantee) We have one pretty traditional transitional housing building -- an old 9BR mansion in the more urban part of our service area that we've renovated. It has space for nine people - mostly individuals, but we can accommodate some small families. It's staffed by a full-time advocate who focuses on the clients and all the issues with that building. HUD says participants can stay in that program for up to 24 months. We do our best not to have anybody there that long. I'm not saying that we never do; we had a client the last couple of years that was waiting on documentation paperwork and work visas, which took a really long time.

Sometimes, if participants think they have two years, they won't work towards self-sufficiency, and towards increasing income. They get a little complacent and comfortable. We try not to let that happen. We get it that transitional housing, for some clients, seems like a never-ending extension of emergency shelter. We try to change that mentality and set clients up for success. This isn't a two-year program for you to do nothing.

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(#07) (Not a current OVW grantee) One of the problems with the single-building program-based transitional housing is that you take a person and you put them in location for these two years and then, at the end of two years, you make them leave everything they've established. Here's our community that they've bonded with, now they have to leave that community. It meets our needs, with our limited funding, because keeping people all in one place allows you to have one case manager who can serve everybody, but I think it really does a disservice to the ladies to get them started in this journey in a location and then they have to leave -- unless it's done with the ability to move them from one place to another place while continuing to have the support in place in a very strong way. We've seen participants intentionally tank on things, we've seen new behaviors start all of a sudden, two months before they had to move out, or the drinking starts again -- it's that stress.

#### ***Questions to Consider***

1. How is the experience of a congregate TH program qualitatively different from the experience of congregate shelter?  
- What can a provider do to help TH program participants in a congregate setting feel like they've made progress as compared with being in a congregate shelter?
2. How can a congregate program be organized to minimize the downsides ascribed to congregate living -- conflict, chaos, participants focusing on other participants' "business," etc.?

## **8. Clustered Housing Model**

See the discussions about provider-owned and provider-leased housing for additional considerations.

### **(a) Overview of Clustered Housing**

Clustered housing may be provider-owned, provider-leased, or, in a few instances, participant leased (if participants are constrained to lease units within a specified apartment complex). Clustered housing is typically offered as part of a traditional TH program, furnishing temporary housing. However, clustered units may be utilized by a transition-in-place program, if the units are in a large enough building or development, so that there is routine turnover, and therefore, openings for the next survivor when a participant completes the program and begins an independent tenancy in her apartment.

Clustered housing could involve one or more buildings in which all residents are program participants, or it could involve buildings in which only a small percentage of residents are program participants. Thus, a clustered housing program could be conducive to sense of community among program participants, or it could provide more anonymity, such that any building resident might or might not be in a program.

### **(b) Relative Advantages and Challenges of Clustered Housing**

#### ***(i) From the Provider Perspective***

- Clustered housing provides the convenience of proximity without the challenges that arise when people with different habits and lifestyles have to share a common living space.
- Clustered housing is less staff intensive than congregate housing, but more staff intensive than scattered-site housing; it typically involves an extended presence by onsite staff, at least during daytime hours.
- Because the building housing a clustered housing facility is typically provider-owned or leased for an extended period of time from a landlord with whom provider has a strong relationship, providers can

invest in enhanced security and on-site space for program activities and offices where staff can privately meet with residents.

- Unlike in congregate housing, onsite staff are not in the participants' shared living space. However, being regularly on the premises, they are likely to often see and at least informally connect with residents most days; as a result
  - There are regular opportunities for the kind of casual conversations with participants that help build trusting relationships;
  - It is relatively easy to arrange meetings with individual participants and easier to organize group activities (e.g., workshops, support groups, recreational activities, etc.); if activities do not take place onsite, it is easier to provide childcare, because all of the children are onsite, and easier to provide transportation to the locations where activities are held, because participants can be transported from a single location.
  - Staff are likely to notice both positive changes (e.g., more energy, more attention to self-care, etc.) and negative changes (e.g., warning signs of depression, substance abuse, trauma, abuse, etc.) in participants. Such changes might go unnoticed if participants lived in more remote locations and if communication were largely limited to phone, email, texting, etc.
- Staff travel time is much reduced, as compared to a scattered-site program.
- If clustered units are rented and not owned... rental of clustered units means fewer landlords for the provider to maintain relationships with (as compared with provider leased scattered-site units, simplifying the process of staying on top of program operations. Deeper relationships with a smaller number of landlords, is likely to result in greater landlord tolerance of tenancy issues, knowing that the provider will work towards a mutually satisfactory resolution, and better communication from the landlord about nascent concerns, before they mushroom into bigger problems.
- Separate living units avoid the kind of interpersonal conflicts that happen in a congregate environment.

***(ii) From the Participant Perspective***

- Provides easy access to staff, especially important in times of crisis. Connections to other program participants depends on the housing logistics: In a building whose residents are all or mostly program participants, living in clustered housing could be conducive to a sense of community for survivors who might not have access to a community of friends and family members on the Outside. In a building in which most of the residents are not program participants, survivors would have more anonymity, and might not even know other participants.
- To the extent that there are group activities, participation in those activities requires only a modest commitment of time and effort, since logistical challenges (e.g., childcare, travel) are likely minimal.
- Unlike living in a congregate setting, participants in a clustered housing program do have privacy, and are likely to feel less watched and judged. However, participants in a clustered facility whose residents are all program participants are likely to experience some of the same kinds of tensions that arise when people are "in each other's business" in a congregate program, although perhaps less intensively, since they don't share a common living space. Participants in a clustered facility in which program participants constitute only a small percentage of building residents are not likely to experience those kinds of tensions, and are more likely to feel like they are living in an ordinary apartment building.
- If participants need a little extra time before they can finalize arrangements for housing, for a voucher, for employment, or for a VISA, it will be relatively easy for a TH program to arrange that extra time in a clustered facility owned by the provider; depending on the provider's relationship with the building owner, it may also be possible to have that kind of flexibility in provider-leased clustered facilities.

**(c) Provider Comments about Clustered Housing Model**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) There are two components to the transitional housing program. Phase 1 is the shelter-based program -- 3 rooms in the emergency shelter. Phase 2 is an 11 unit apartment complex in a different part of town. Our agency owns the buildings that house the congregate shelter and the clustered Phase 2 units. In both the Phase 1 and Phase 2 units, a case manager is based in the same building as the units, so participants have easy access to support staff. Although clustered units don't provide participants with the same opportunity as scattered-site units to be intermingled with the general populations, having all the participants in the same building makes it easier for people to come to their support groups, which are held in our Phase 2 building.

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(#02) Our transitional program houses six families and four single women. The families are housed in two scattered-site apartments we lease from a management company and four apartments in a building we own. The building we own also includes a 4-BR apartment that communally houses the four single women. If participants were all in scattered-site apartments, it would be harder to meet with them. Although we really believe in the voluntary service model, we do like to just check in. Lots of scattered-site units would mean you could have more clients. When participants live on top of each other, it can increase the drama.

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(#03) We have an MOU with an affordable housing network here and they put our participants at the top of their waiting list and they have below-market-rate scattered-site housing throughout our community. Right now, though, the majority of our participants are clustered in one of their largest complexes. Our agency provides rental assistance for a period of time to help participants. Participants hold their own leases, and they can remain in the unit after our assistance ends, if they want. So it's a transition-in-place program.

Each participant's level of housing assistance is individually determined, based on their circumstances. A lot of women have too many barriers to be paying full rent until maybe they pay off some of their debts or until they find a job. A lot of women don't even have jobs when they first enter, and that's the nice thing about the affordable housing network – because we have the MOU and they know we can help with rental assistance throughout the participant's time in the program, they don't require that the tenant have a job. And they're willing to accept people with barriers that other landlords might not: evictions, criminal history, as long as the person is not on the child abuse registry. Even if a client is at active risk of stalking, that would not deter us; it would just be an extra barrier, and might mean that we want to avoid housing her in a secluded area, and that she needs our wraparound services. Of course, we wouldn't make those decisions for her.

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(#04) We currently have ten units of transitional housing. Four of those units are OVW-funded scattered-site apartments, which we lease through property management companies and then we sublease to participants. Participants pay the standard 30% of adjusted income towards rent and utilities, or \$50/month if they don't have any income. Participants in that program sign a one-year lease, with possible month-to-month extensions. The remaining six units are in three duplexes that we own; each unit is a two-bedroom apartment with a project-based Section 8 voucher, made available to us by the Housing Authority. The participants are the leaseholders in these units, and they pay 30% of their income to cover rent and utilities. After a year, they can request a portable voucher, which they would have 2-4 months to use to transition to other permanent housing. We tried the transition-in-place model in the past, and were not very successful. The primary reason was that participants couldn't afford the rental amount when our assistance ended.

Beyond trying to match family composition to an appropriately sized unit, we do interviews to determine whether they would do better in a scattered-site unit in the community or in a duplex, where they would have a program neighbor. It really depends on their support system, friends, family. For example, if in the

interview, the applicant indicates that they often are depressed and will not reach out to the neighbors, we might encourage her to choose one of our duplex units. We do have functions that we bring all of the families together for periodically - a holiday party, etc. - but if they indicate that they want to form some additional friendships, want to explore sharing childcare, might have a difficult time reaching out to strangers, we would recommend a unit in our cluster, where the neighbors are other program participants. By contrast, somebody who's maybe more established in the community, pretty grounded, has a good job, doesn't have as many barriers and doesn't feel like they need those additional relationships and new friendships -- they might be better for a scattered-site unit.

### **Questions to Consider**

1. How much of the benefit of the clustered housing model is lost when there is no common/program space in the building? What can a program do to compensate for the lack of onsite common space?
2. What are the pros and cons of clustering program units in one or two much larger buildings, so that mainstream tenants outnumber program participants versus clustering program units in a building that is primarily or entirely filled with program participants?
3. Is the benefit to participants of clustered housing lost if there are few occasions for them to get to know their fellow participants? Does clustering under those circumstances become mostly a convenience to providers, so that there are fewer landlord relationships to maintain and so staff require less travel time to meet with participants?

## **9. Variations in Duration, Depth, and Scope of Housing Assistance<sup>42</sup>**

### **(a) Overview of Constraints on the Use of OVW versus HUD Housing Assistance Funds**

The OVW TH program funding allows providers great flexibility in using program funds:

- **Combination of Housing Models:** With their OVW TH grants, providers can combine any of the various housing models: provider-owned units (either separate from or co-located in the shelter), units leased by the provider, and units leased by the participant with rental assistance from the provider. With landlord approval, a provider can shift a tenancy that started off in the provider's name and put it in the survivor's name, while continuing financial assistance, helping the participant (re)build their credit and housing history. HUD TH and Rapid Rehousing (RRH) grants do not allow that kind of flexibility.<sup>43</sup>
- **Payment of Rental Arrearages:** Providers can use funds to pay down a rental arrearage to facilitate restoration of eligibility for public housing or subsidy assistance. (HUD ESG RRH grants can cover up to six months of rental arrearages; CoC RRH grants cannot be used to cover rental arrearages.)
- **Payment of Current Utility Bills and Utility Arrearages:** Providers can assist with utility payments, or can pay down a utility arrearage, allowing restoration of utility service, which is often a prerequisite to a tenancy in which utilities are not included in rent. (HUD ESG RRH grants can cover up to six months of utility arrearages and ongoing utility costs, but CoC RRH grants cannot; both ESG and CoC RRH grants can, however, cover startup utility deposits.)

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<sup>42</sup> See also [Chapter 6](#) ("Length of Stay") of this Resource Guide.

<sup>43</sup> §578.87(c) of the [CoC Interim Rule](#) prohibits projects from combining the use of rental assistance funds (used to assist participants when they are the leaseholders) and leasing funds (used when providers hold the lease). As explained in [HUD Rapid Rehousing: ESG vs. CoC \(2013\)](#), Rapid Rehousing (RRH) grants can only be used for rental assistance.

**Note:** [HUD Rapid Rehousing: ESG vs. CoC \(2013\)](#) is the very readable and highly recommended source of information about eligible expenses and limitations of HUD ESG and CoC RRH grants in the remainder of this section.

- **Constraints Pertaining to Rent Level and Housing Quality:** OVW-funded programs are not constrained by HUD Fair Market Rents or Rent Reasonable caps, which allows greater flexibility in more competitive rental markets (which also tend to be where the jobs are). Similarly, OVW-funded programs are not constrained by HUD Housing Quality Standard (HQS). Although programs certainly don't want to place survivors in substandard housing, adherence to HQS can sometimes make it difficult to find affordable housing that meets HUD program requirements, especially in rural areas.<sup>44</sup>
- **Minimum Lease Requirements:** OVW-funded providers are able to assist tenancies that do not come with a full-year lease (as is required in CoC-funded HUD Rapid Rehousing programs). Some landlords are reluctant to sign 12-month leases, especially when the participant has a troubled housing history, poor credit, uncertain job prospects, etc. (HUD ESG RRH grants require a lease in the tenant's name, but do not specify a one-year minimum.)
- **Amount and Duration of Rental Assistance / Required Contribution to Housing Costs by Participant:**

**OVW-Funded Projects:** Section (c) of the enabling legislation, [42 USC §13975](#) requires that OVW TH grant recipients provide at least six months, but not more than 24 months of assistance, but allows for an additional six month extension (up to 30 months) upon approval by the provider of a participant's waiver request, if that participant has been unable to obtain permanent housing, despite a "good faith effort."

Within that 6-24 month timeframe, the OVW grant allows providers great flexibility in determining the amount and duration of rental assistance, the amount of the participant's contribution to housing-related costs (rent and utilities), and what to do if participants cannot assume financial responsibility as quickly as initially projected. OVW does not specify a minimum or maximum amount that a participant can be asked to contribute towards their program housing costs. OVW also allows providers to delay the start of participant contributions towards housing, or return all or part of a participant's contributions towards housing, for example, so participants can pay move-in costs, buy a car, cure an arrearage, etc.<sup>45</sup>

**HUD-Funded Projects:** As described in Section 2 of this report, Continuums of Care that administer CoC grants and states, counties, and jurisdictions that administer ESG grants are required to develop and implement written standards governing eligibility and priority for assistance and certain parameters defining the amount, duration, and scope of that assistance:

- Per §578.7(a)(9) of the [CoC Interim Rule](#), "At a minimum, the written standards [that CoC's must develop] must include: (i) Policies and procedures for evaluating individuals' and families' eligibility for assistance [from CoC-funded projects]; (ii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance; (iii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance; [and] (iv) Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance."
- Per §578.37(a)(1)(ii)(B) of the [CoC Interim Rule](#), "These projects ... may set a maximum amount or percentage of rental assistance that a program participant may receive, a maximum number of months that a program participant may receive rental assistance, and/or a maximum number of times that a program participant may receive rental assistance." Although the [CoC Interim Rule](#)

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<sup>44</sup> See discussion in Section 1 about Fair Market Rents, the "Reasonable Rent" standard, and Housing Quality Standards.

<sup>45</sup> As illustrated by their comments, different providers have different opinions about the appropriate duration of participant assistance, and the conditions under which such assistance should be offered and extended. As discussed in [Chapter 4](#) ("Taking a Survivor-Centered/Empowerment Approach: Rules Reduction, Voluntary Services, and Participant Engagement"), some of these conditions -- for example, making assistance beyond the six-month-minimum contingent on the participant's "making good use of services" or "making progress" -- appear to bump up against the statutory requirement that housing assistance not be conditioned upon participation in services (i.e., "voluntary services).

defines these parameters as a project-specific written standard, a CoC could establish such a standard for all RRH projects funded through the CoC.

- Per §576.400(e)(3)(vi)-(ix) of the [ESG Interim Rule](#), "At a minimum, these written standards [that states, counties, and jurisdictions administering ESG grants must develop] must include: (vi) Policies and procedures for determining and prioritizing which eligible families and individuals will receive ... rapid re- housing assistance; (vii) Standards for determining what percentage or amount of rent and utilities costs each program participant must pay while receiving ... rapid re-housing assistance; (viii) Standards for determining how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time; and (ix) Standards for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the ... rapid re- housing assistance that each program participant may receive, such as the maximum amount of assistance, maximum number of months the program participant receive assistance; or the maximum number of times the program participant may receive assistance."

A number of the providers expressed concerns<sup>46</sup> about constraints on the duration and scope of assistance with housing-related costs that were attached to their Rapid Rehousing grants. Some of those providers attributed those constraints to HUD regulations, when in fact, they were **not HUD requirements**, and instead **may have been codified in written standards** developed by the state, county, or city administering their ESG grant or the Continuum of Care administering their CoC grant. **Victim services providers concerned about such constraints can advocate for changes to those written standards during the periodic reviews that CoCs and ESG-administering states and jurisdictions are required to schedule.**

In addition, as described in [HUD Rapid Rehousing: ESG vs. CoC \(2013\)](#) (see p.4), ESG RRH grants require that assistance beyond one year be means-tested: participants are only eligible to continue receiving assistance if their income is at or below 30% of the Area Median Income. (The CoC RRH regulations do not establish such an income eligibility standard, but CoCs are free to implement written standards that incorporate income eligibility, which could apply to the initial determination of eligibility, or eligibility for continued assistance after, say, a 12-month initial period of assistance, like the ESG program.)

Pursuant to §578.77 of the [CoC Interim Rule](#), HUD-funded TH programs providing temporary housing (typically in a provider-owned or provider-leased unit) cannot ask a participant to pay more than 30% of their adjusted net income<sup>47</sup> (calculated using the same rules that Housing Authorities use to calculate income and allowed deductions) towards housing costs; however this provision only establishes a ceiling on any participant contribution; TH program providers can waive any such occupancy fee or set the charge at a lower level. §578.87(d) of the [CoC Interim Rule](#) prohibits programs from charging any other fees (e.g., covering non-housing-related costs).

**Other Constraints and Considerations:** Of course, the higher the amount of monthly rental assistance (i.e., the actual cost of the apartment, minus the participant's contribution), and the longer that assistance is offered, the fewer survivors can be served.

Some providers believe that more extended assistance -- allowing a participant to clear up old debts; devote more time to their education and training goals, so as to enhance future employability; or set aside a portion of their income as a contingency fund for future emergencies -- is in the best interest of a successful outcome. Other providers believe that "too much assistance" reduces participant motivation, fails to prepare

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<sup>46</sup> See also comments in [Chapter 12](#) ("Funding and Collaboration: Opportunities and Challenges").

<sup>47</sup> The regulation actually states that if an occupancy charge is assessed, it may not exceed the highest of (a) 30% of net income, (b) 10% of gross income, or (c) the welfare payment housing allowance, if a family is receiving public assistance. In practice, the 30% of adjusted net income is typically the standard used.

participants for "real-world conditions," and unduly limits a program's ability to enroll other survivors who, with transitional housing, might have no choice but to return to an abusive situation.

Some providers have established a **minimum income requirement** or a requirement that participants be **employed at enrollment or within a specified period of time**. Of course, the lower a participant's income (and earning potential), the greater the amount of assistance they will need to cover their monthly housing costs. If a survivor doesn't have a real prospect of gainful work -- or of obtaining a housing subsidy<sup>48</sup> -- within the necessary timeframe, a housing placement would likely not be sustainable. On the one hand, survivors with such serious income barriers might be seen as deserving a high priority for assistance; on the other hand, establishing a minimum income/employment criterion for enrollment might be seen as recognition that some survivors need more help than a resource- and time-limited assistance program can fully provide.<sup>49, 50</sup>

It might be helpful for the OVW and HUD to weigh in on whether enrollment requirements pertaining to minimum income or employment are consistent with the goals of their respective grant programs.

### **(b) Provider Comments on Duration / Depth / Scope of Housing Assistance**

***Inclusion of a comment does not imply endorsement by the authors or OVW of a provider's approach.***

(#01) There are two components to the transitional housing (TH) program. Phase 1 is the Shelter-Based Program -- 3 rooms in the emergency shelter. Phase 2 is an 11 unit apartment complex in a different part of town. Our agency owns the buildings that the congregate shelter and the clustered Phase 2 units are in. People in the Phase 1 shelter-based TH units can fill out an application and go thru an interview process, and if they are accepted, can finish out their 2 years of TH in a Phase 2 unit. The 2-year limit counts the combined

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<sup>48</sup> If participants are placed in affordable or subsidized housing, that makes housing assistance less expensive for the provider. However, as described in §578.29 and §578.51(a)(1) of the [CoC Interim Rule](#) and on p.7 of a [HUD guidance document comparing ESG provisions for homelessness prevention and rapid rehousing to the predecessor HPRP program](#), **HUD does not allow layering of government subsidies**, so HUD RRH grant funds cannot be used to pay for rental assistance for participants who are receiving other federal/state/local government-funded rental assistance or living in units receiving operating subsidies through a project based subsidy or via the tax credit program.

Also, because public housing and units subsidized with a project-based voucher are intended for use as permanent housing, they cannot be used in conjunction with a TH program. Provide comments explained their attempt to circumvent that limitation by allowing participants to remain in their "program unit" for as long after they complete the program as the participant wants; to encourage participants to vacate that unit and make it available to another survivor, however, providers partner with their local housing authority to offer "graduating" participants a "portable" Housing Choice voucher that can be used anywhere else.

<sup>49</sup> Neither OVW nor HUD provide written regulatory guidance as to whether a minimum income requirement or an employment requirement is consistent with the intent of their respective grant programs. On the one hand, establishing minimum income or employability requirements would create barriers to serving individuals and families in greatest need of assistance, and would probably be seen by HUD as inconsistent with the Housing First approach that HUD encourages. On the other hand, devoting adequate resources to extremely low or no-income households would limit a program's ability to serve other households.

<sup>50</sup> If a survivor's safety would be jeopardized by a return to the abusive relationship she fled, one alternative to seeking shelter or sleeping in a car or other "location not meant for habitation" is doubling up, or living in other overcrowded or substandard conditions. While OVW does not specifically address this option, HUD regulations are clear that RRH funds cannot be used to pay for substandard or overcrowded housing, even if the apparent alternative is homelessness. To determine what "overcrowded" means, HUD relies on what has come to be known as the [Keating Standard](#): two persons per bedroom or sleeping area, subject to consideration of the size of the bedroom/sleeping area and the age, gender, and relationship of the two persons. Although financial assistance in sustaining doubled-up or otherwise overcrowded living arrangements might lead to a more sustainable housing situation for an extremely low income household, that might not be an approach that a grant-funded program can "officially" embrace, let alone financially assist.

time in the Phase 1 and Phase 2 programs. The Phase 1 program charges rent if the participant can afford it, but the payment is put in a savings account, and is given back to the participant -- to help start a bank account in her own name, if she can, or to pay towards moving costs/security deposit -- when she leaves. Phase 1 participants can also get their money back, if they need it for a car repair or something for their child. It's really their money; we're just saving it for them. If someone in Phase 1 has no income, they pay no rent.

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(#02) We have six co-located transitional units in our DV shelter, allowing stays of up to six months. Participants may pay 30% of their income into an escrow account, which is returned to them at six months. Most clients are not able to pay that much, but we only require they have an income, it could be through TANF, it doesn't have to be a job, and they don't have to pay rent.

If we were advising a new TH program, we would encourage them to require accountability. This is a problem with all our grants: they're voluntary, you can't require anything of victims, and therefore, you're not preparing them. Saying "you can pay 30% and we'll save it and give it back to you," is different from requiring them to pay 30% and be partially sustainable and accumulate more and more accountability over the two year time period, so that by the end of the two years, they're paying the full rent. Instead, we dump them into mainstream society two years later with no income and they're used to paying 30% of their income for rent, and all of a sudden, they need to pay five times more and it just puts them back in the cycle of poverty.

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(#03) For their first six months in the program, we help the women with the rent. The first three months, we pay 100% of the rent. Then 60%, 50%, and 40%. And then they have full responsibility. A big problem is that some women who are coming from a shelter -- that's the only way you can get into the program -- have had no employment and are accepted into our program based on their commitment to look for work, but six months is not enough time, so we're supporting them for longer. We have an endowment fund we can draw from to supplement the OVW grant, which is why we're able to provide longer-term financial assistance. If we didn't, they would be evicted, and likely end up back in the system, or back with their abusers.

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(#04) Rapid rehousing rental assistance is typically six months. In our program, before HUD changed the rules, our rental assistance was 100% for 12 months. But we can't do that anymore, so at some point, whether it's at three months or six months, we have to require the participant to pay a portion of their income. The advantage to having your rent paid for one year is you can pay down a utility arrearage, or you can save your money and give yourself a cushion. A lot of the women we serve haven't had that before. The disadvantage of our paying a participant's rent for a year is that suddenly, in the 13th month, when they have to pay it themselves, it can be kind of shocking. So a declining rent subsidy is probably a better way to go. But it's really nice to give the women we serve an opportunity to save some money, so they can have a cushion.

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(#05) We have about 12 families that participate in the program at any time. We own two duplexes. The rest of the families are in scattered-sites and we help pay their rent to their private landlord. In our duplexes, they can only stay up to 24 months. If the units they lease from private landlords, they can transition-in-place and stay past our assistance. Clients receive six months of fully subsidized rent, three months of 50/50, and three months of 75% on the client's part, 25% on our part; they can continue to receive supportive services for the full 24 months. We used to provide six months of support and be done. But going from \$700 of support to zero was too much. We found it not to be effective, so we shifted to a gradual transition.

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(#06) We have an OVW-funded congregate program serving nine single women (no children) community-style in a property we own. All the money the women pay towards their housing costs goes into a savings account and they get it all back when they leave the program.

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(#07) We will pay rent and utilities at 100% for six months. And the next two months we drop down to 75%. The next two months, we pay 50%. And then the last two months, we pay 25%. At the end of 12 months, the participant is, hopefully, self-sufficient and to a point where they can pick up the costs themselves. We would not put a client with three small children into an apartment if we did not have reasonable evidence that she would be able to maintain rent payments after our financial assistance ends in 12 months; that would just be irresponsible. Certainly there have been circumstances over the last almost three years that a client needed two or three or even six additional months, so we have extended financial assistance depending on an individual's circumstances.

Sometimes a utility company will not turn on electricity in a client's name because she has a previous debt. We've got funds in our budget to pay partial arrearages. And we've got a working relationship with the utility companies, so if we're paying, say, a \$250 deposit, then even if the participant has bad credit, they'll turn on the service, knowing that they've got that deposit on file and even if the client leaves, they'll get their money.

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(#08) We have four scattered apartments for individuals or families who need them: homeless, DV survivor, over age 18. We rent through a development corporation and then we sub-lease to the clients for 18-24 months. Only the agency name is on the lease for confidentiality reasons. Clients have to find other housing when their time in the program is up. Everything is included in the rent so they don't have to pay separately for utilities. If someone has no income, of course we wouldn't charge them rent. If someone has an income, we are allowed to charge up to 30% of their income. If someone is receiving assistance, and has unpaid bills, I'd rather them maybe pay off what they have to pay and save and maybe not charge them rent at all. And if they have paid off their bills, I might prefer that they save 20 percent and pay 10 percent of their income towards rent. We try to be very reasonable because it makes no sense if the rent is making them stress out.

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(#09) We pay \$350 toward rent and \$100 towards their utilities. Participants pay the difference. Hopefully, they're able to put whatever extra income they have into a savings account. It's not required, but we encourage it, because we feel it's important to have something to fall back on in case something happens with their job, or their housing, or if there is a family emergency.

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(#10) On average, our program can support seven scattered-site units. We can occasionally take on another household or two, depending on how much our subsidies are costing and where our budget is. We feel that basing rental subsidies on participants' income works well. We decided early on that we wouldn't have rigid, tiered system, like for the first six months, you get 75% of your rent paid, and then the next six months, you get 50%, etc. We find that doing flexible rent subsidies allows participants to have the assistance change with their needs. We do the rental calculation, just like Section 8, based on 30% of their adjusted net income and the standard utility allowance. Our approach has been very successful in helping people maintain their housing, and not lose it because they can't pay their portion of the rent. It also prepares them for subsidized housing, which a lot of our families get. Participants can choose to keep their apartment at the end of the program. If they get a voucher, they can stay in the unit or use the voucher in a different apartment.

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(#11) We work with them on budgeting to see where they are financially at the point of acceptance into the program -- if they're working, if they're not working, but looking for a job. If we take someone who isn't working, who hasn't worked in years, but who is looking for work, we might start off by paying the full amount of rent and deposits. We work it in six-month increments with the participant and the landlord. And as a participant finds employment, we work with them to taper off our assistance. Everybody thinks they need more assistance than we give, but we work really hard with them on the budgeting, and try to help them with priorities: "No, you don't need the \$200-a-month smartphone, that's a luxury; you need to have a roof over

your head." It's a constant educational process for them, and for us. Sometimes we've also covered utilities. It's an individually-based assessment. Can they cover those costs while we cover the rent, and work toward a little more economic stability? Utility deposits can be \$300, just to get service in your name, which can be a barrier. So we have provided assistance with that.

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(#12) We operate two programs that utilize transition-in-place scattered-site units that participants rent from private landlords. One program is funded with OVW transitional housing dollars and the other with Continuum of Care Rapid Re-Housing dollars. Both programs use the same model, but have different target populations. Overall, we provide 90 families with six months of service coordination, including goal-setting and budgeting support, access to job training assistance from our MOU partner, access to counseling and legal services, etc. Thirty of those 90 families will receive an additional \$1,500 grant distributed over the 4-6 month period as step-down rent assistance. To be one of the 60 families getting the service coordination, but not getting the rental assistance, all you have to do is show willingness to engage in the process. Perhaps, over the course of receiving services, you will develop the income needed to move yourself over to being fully served, including rental assistance. That's sort of the carrot to participate in the job training and the service coordination. The reason why people stay in that services-only program without the rental assistance is because they are hoping to be able to get the rental assistance. We don't make any promises and people understand that. But we have a lot of little incentives that encourage participation without mandating it.

When we had the Recovery Act grant, we gave everyone \$2,500 in rent assistance. When that ended and was replaced by the regularly funded application, we reduced it to \$1,500 so that we could continue to serve the folks we wanted to be able to serve. But the sweet spot seems to be between 2,000 and \$2,500. The Continuum of Care grant is funded on an annual basis, and in the most recent one, we reduced the number of fully served families from 30 to 20, so that each family could receive \$2,250 in rental assistance, to see if that amount might better help the clients make that transition to stability. A lot of people think we're crazy because we only give out such a small amount of money. But we've had really good success with people being able to assume responsibility to pay their own rent. But six months is critical, it's really working with the family for six months, and \$1,500 just doesn't stretch over six months.

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(#13) We have seven units of OVW-funded transitional housing, and an additional 14 units of transitional housing funded through the state (but not HUD). All the units are scattered-sites, rented from mainstream landlords, under a lease signed by our agency, and then subleased to the participants. Those who have income pay 30% of their income towards the rent and utilities; if someone has zero income they pay zero rent. Our whole goal is to help participants reach self-sufficiency, so if they are earning an income that isn't a livable wage, our formula takes that -- and the number of kids they have, medical debts, school loans they're trying to pay off -- into consideration; so they could still end up with zero or \$10 in rent.

If a participant misses a payment, then they miss a payment and we move forward working on how we can better accommodate them because the grant covers the rent. In essence no one is being asked to leave for nonpayment of rent. So there's isn't a penalty but we encourage the residents to be mindful that once they leave this program this is not how the real world works.

I don't think there's a better way to set the amount participants contribute towards rent, and still help people reach self-sufficiency. Having the program pay the entire rent would not assist participants in moving toward self-sufficiency, because when they transitioned out of our program and into permanent housing, having to pay rent would be a jolt to the system.

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(#14) We operate a statewide program. What we've done historically is taken our transitional housing awards and divided that award up between 24 programs to make sure the funds are accessible to everybody across the state. The drawback was that the money available to each program wasn't enough to help even one

survivor for two years. With our new grant, we won't be dividing the money up by program – it will be allocated first come first serve. And so, victims that need housing will be offered up to two years of housing assistance and support services -- compared to the OVW-required minimum of six months -- and not much more -- that we've been able to offer them in the past.

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(#15) We are currently serving five units in scattered-site, transition-in-place units, where the lease is under the participant's name. The participants are responsible for identifying their own housing within 30 days of being admitted to the program and are responsible to contribute to rent as follows: For the first six months, the program pays 100%; for months 7-12, the program pays 50% and the participant pays 50%; for months 13-18, the program pays 25%, and the participant pays 75%; and, for months 19-24, the program pays 20% and the participant pays 80%. Our funding comes from OVW and a private foundation.

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(#16) The building we own has four 2BR units, which can house a small family or individuals. Participants move out when they complete the program. While they're in the program, the money they would ordinarily pay towards rent goes into a savings account, so they're basically building up money for when they move out. We ask people to pay 10% of their income for the first six months in a unit, and then 20% of their income the next six months. And then in the second year, we ask them to pay 30% of their income into this account. It's their account, they can take that money out the next day, but we encourage them to save it for when they move out. When they do move out, we provide help with the transition. We pay the first month's rent and deposit. And hopefully they have a little nest egg to help with the second month and beyond.

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(#17) Our OVW transitional program consists of 11 scattered-sites. We fully subsidize rental costs; however, we ask the client, if it's possible, that she save 30% of her adjusted gross income, so that at the end of the year or the two years, she's able to be self-sufficient and maintain that apartment or move somewhere else permanently. We help them find the place where they will live while they're in the program. We've identified some apartment complexes and we have built collaborations and relationships with those apartment complexes. Some of the apartment complexes will not even look at credit history. Some will waive the administration fee, so we have a pretty good reputation in the community. If the client isn't interested in those apartment complexes, then they're free to find one on their own.

The rental assistance continues for the duration of program. At six months we ask that they apply for an extension, and then we look at goals and how much they've saved, if they've addressed barriers, etc., so every six months they can apply for an extension up to two years. Even though services are voluntary, the case manager / advocate will check in with the client and they're priority is always discussing housing options. Are you seeking housing options? Do you need any other housing or other resources?

Most of our clients in our OVW program are accessing case management services; in fact, we don't have any client now that doesn't. I believe that when women are given the opportunity to really be self-sufficient and they're given choices and they don't have to worry about rent and they're able to save money and address barriers, that they're more apt to do that. Both in our emergency shelter and transitional, all services are voluntary. We just find that it makes life a lot easier for the advocate and it empowers the client.

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(#18) We have one HUD grant and one OVW-funded project. Both programs use the transition-in-place model. The OVW grant is funded to provide a higher level of rental assistance than the HUD grant. So the OVW-funded program can enroll participants with lower incomes than the HUD grant. In order to make the HUD grant work, we had to put in place higher income eligibility guidelines. In the OVW-funded program, the participant pays no rent in months one and two; 10% of their income towards rent in months three and four; 20% of their income towards rent in months five, six and seven; and from months 8-12, they pay 30% of their income towards rent. In order to enter the program, a woman or family needs only enough income to cover

the cost of utilities and basic living expenses. So, for example, someone with enough income to cover \$250 for their utilities, and who had Food Stamps could fill an opening in the OVW-funded program. By contrast, in order to qualify for the HUD program, a household needs an income of \$850 per adult, plus \$150 per child, plus \$250 for utilities, food, etc. So you've got to be working, which means you have a work history, and possibly a higher level of education and the life skills to manage a household as the primary income earner.

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(#19) Our transitional housing program provides 100% of the rent for three months, and then we gradually step down our level of assistance, going to 75% coverage, etc. We step down our level of assistance on a case by case, month by month basis. Our financial assistance ends after a year, but services can continue, up to another full year. Our choice to provide step-down financial assistance was based on a desire to gradually place more responsibility in the hands of the participants. It is also a way to stretch the money; if we were to support apartments for two years, we would definitely not be able to serve as many people.

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(#20) (Not a current OVW grantee) Our program used OVW funds to provide rental assistance to survivors in scattered-site units. We didn't have any good congregate options, and scattered-site was the most flexible approach, allowing clients to choose the area in which they wanted to live that would be closest to their children's school or their employment, especially because some people don't have cars. There's no public transportation, they would have to walk or take a taxi to work. The lease agreement was between the participant and the landlord. And we paid the rent. Our intent was for them to find units that were in their price range, so they could continue to afford the units after our assistance ended. That happened in some cases and didn't happen in cases where participants couldn't develop the income they needed to sustain themselves. In those cases, we had to look for other types of housing assistance when our program ended or when their 24 months of assistance ended. Most participants have still not returned to the abusive situation. They found other options with friends or family members or were able to get employment. I can't think of anyone that went back to an abuser.

Because we are a small place, and everybody knows or is related to everybody else, the scattered-site model and our practice of doing month-to-month rentals, instead of six- or 12-month rentals worked well for clients who might need to relocate because they were being pressured by friends or family of the perpetrator. That approach also addressed challenges created by the lack of public transportation. It allowed a woman who found new or better employment to relocate to be closer to her new job.

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(#21) We are a statewide domestic violence, sexual assault coalition. We flow the money through to our member programs that work with victims/survivors. The member agencies pay the landlords directly on behalf of the clients, for six months, possibly longer. Those agencies request reimbursement from us for that rental assistance. Five of our member agencies also receive funding for 10 hours/week of case manager time. (Our other member agencies pay their case managers from different sources of funds.) We try to spread our funds as thinly as we can, while still helping. Following the OVW guidelines, we commit to a minimum of six months for each client. Some clients, after six months, can make it on their own, or find something else. We have helped a few clients for up to a year, or a little over a year. The money is long gone, before the need is met. Even though we have two years left on our project, almost all rental assistance funds are obligated.

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(#22) (Not a current OVW grantee) HUD grant and state contract funding covers the cost of program staffing plus leasing our 18 scattered-site units. Our agency is the leaseholder, and we sublease to participants, who are asked to pay an occupancy fee which is 30% of their adjusted net income, mirroring what they'll pay when they're in subsidized housing. We put that money into an account that we use as flex funds to help cover their move-out costs -- past due utilities, first month's rent and security deposit in their new home, purchasing a fridge if needed, etc. So that money pretty much goes back to them. The 30% occupancy fee is intended to

help them with budgeting. If they can budget the 30% every month for two years, we're confident they'll be able to pay their share of rent.

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(#23) Our program uses a scattered-site, transition-in-place model, typically serving 6 to 7 participants at a time. Clients sign the lease and our agency pays their rent through a voucher system. Our rental assistance is graduated. For the first three months, participants pay nothing; beginning with the fourth month, they pay a little more towards their rent each month until, by month 12, they're ready to take on the full cost of rent. The calculation is based on each participant's individual circumstances; they know going into the program what they're going to pay and when they're going to pay it. It's in the paperwork they sign when they enroll in the program. Our process is flexible: if they need another month with a 100% or 80% subsidy we work with them. We don't want to set them back. We've got 12 months and, in fact, up to 24 months, if we need it, to help them get there. Graduated assistance is how we also assist with transportation and utilities. We pretty much pay childcare the entire time they're in the program; but with these other costs, our assistance is graduated. With respect to the rent, our philosophy is, let's set these women up to succeed. We think that graduated assistance is better than having them go from zero rent for 12 months to \$600 all of a sudden.

We also have a rapid rehousing program that pays their entire rent for the first three months, and then lets the client take over from there. We talk with the women about what's going to happen at the end of the three months. Sometimes, before they even go into that program, we start looking at other housing alternatives. Our hope is that they can save money during those first three months, and that their income is substantial enough, so that at the end of the three months, they can begin paying the rent and utilities, and retain their housing. Unfortunately with only three months of support, it's very difficult to predict that.

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(#24) We do a scattered-site model and put all the leases in the survivors' names so we can help them reestablish credit. Once a person is approved to be in the transitional housing program, we work directly with her landlord and we agree on a schedule each month of what our rental assistance is going to be. The participant comes in once a month for recertification, and based on her needs and her individual situation, we determine what the assistance will be for that next month. It could be direct rental assistance, utility assistance, relocation assistance, or daycare -- a wide range depending on her individual circumstances.

We receive a substantial amount of HUD ESG funding through the City for rapid rehousing and we use that funding primarily for rental and utility assistance. We use the OVW money to support the staff. Since our HUD ESG money is limited to the City, we supplement that with the OVW money to offer rental assistance to survivors who want to relocate to surrounding areas, if it's not safe for them to relocate in the city.

Although HUD requires that participants receiving rapid rehousing rental assistance have a one year lease, we just say they're in a program where they're going to receive some financial assistance. We don't say, "we're going to give you six months." We try to base it on individual need, and the landlord knows that we're not committing to a year, even though it is a one year lease. That hasn't been a problem. We have a group of landlords who are really very helpful, and if there's ever a problem with a survivor we're right on it.

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(#25) We offer 3 to 6 months of rental assistance. The decision you have to make as an organization is to house fewer people with more funds or house more people with less assistance. You're always battling that bottom line. We try to make decisions based on individual needs: if they really only need first month's rent and deposit, that's all we give. If they really need a year's worth of financial support, we'll give that, too, as long as our assistance meets the funder's guidelines. One grant says you have to recertify every three months; another says you have to recertify once a year. Different grants set different income eligibility guidelines.

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(#26) HUD's Housing Quality Standards can sometimes pose a challenge in implementing our model. I hear a lot about that issue in some of the rural areas that are providing housing services for survivors. That's another place where having ultra-flexible funding can be helpful because you can say to a landlord who is offering sub-standard housing, "We can pay to fix some of these things," so it's a livable place for the survivor. A lot of the affordable housing is pretty sub-standard; we can do some of the needed improvements with some sources of funds and we can't do them with other sources of funds. Unfortunately, the trend has been toward less and less flexibility and we are really trying to talk as a community about what kind of local public funding can go into creating pots of flexible funds where those kinds of things are more possible.

When we first piloted this model, we were able to use our HUD McKinney funding to buy furniture and pay for childcare and do all kinds of things with the funds because they were flexible; now they're not. Unfortunately, some of our community funders have adopted those same narrower federal eligibility and allowable cost parameters, I think, to make things more uniform. Sometimes even when it's local public funding, there are some constraints attached that disallow some of the things that we used to be able to pay for. Survivors are facing way more than economic barriers around rent and utilities, so losing that flexibility has made our work more difficult. Over the years, we've sought foundation funding and use some of our discretionary funds to fill those kinds of needs for survivors, because it's really tough when all you can provide is a utilities allowance and rent assistance, and you can't help much with debt or arrearages that folks come into their situation with.

#### ***Questions to Consider***

1. OVW offers considerable flexibility with respect to the scope, depth, and duration of housing assistance that a program can provide. Indeed, different participants need different kinds of financial assistance until they are able to sustainably manage their housing costs.

- What are the pros and cons of offering the same mix of assistance to all participants versus individually tailoring the scope, depth, and duration of financial assistance with housing-related costs to each participant?

- For example, is it acceptable to offer some participants the maximum level of assistance up front and let the level of assistance taper off, while offering other participants a stable and predictable level of assistance throughout their stay in the program?

- If the scope, depth, and duration of financial assistance were allowed to vary from person to person, how would the types and levels of assistance be determined?

- Is "fairness" a criteria in deciding how much to offer one participant as compared to what's offered to another?

2. On what basis should a program decide whether to offer more extensive or longer-term assistance to a participant than was originally planned and agreed upon?

3. Establishing a minimum income requirement or a requirement that participants be employed at enrollment or with a specified number of months after enrollment may well be a pragmatic approach to ensuring that housing placements are sustainable; are such requirements consistent with the spirit of the OVW TH grant program?

## **10. Appendix A: Project Description and Methodology**

### **(a) Project Description: Summary**

*Transitional Housing for Survivors of Domestic and Sexual Violence: A 2014-15 Snapshot* provides an in-depth look at the challenges and approaches taken by Office on Violence Against Women (OVW)-funded providers to address the needs of survivors who have become homeless as a result of having fled domestic violence, sexual assault, dating violence, and/or stalking.

The information in the twelve chapters of the report and accompanying webinars, broadsides, and podcasts comes from 124 hour-long interviews with providers and an in-depth review of the literature and online resources. Our analysis of provider comments was informed by the insights of a small project advisory committee (Ronit Barkai of Transition House, Dr. Lisa Goodman of Boston College, and Leslie Payne of Care Lodge) and the reviews and comments on the initial drafts of chapters by Dr. Cris Sullivan (Michigan State University) and Anna Melbin (Full Frame Initiative).

Although the components of a transitional housing (TH) program -- a place to live and staff support for healing, decision making, and taking next steps -- are simple, the complexities attendant to providing effective survivor-centered assistance are many, as illustrated by the following enumeration of topics covered in the report (which, in many cases, only scratches the surface):

- [Chapter #01](#) - **Definition of Success & Performance Measurement** - Explores how funders and providers define and measure success and program performance; how participant-defined goals are tracked; how participant feedback is collected; and how the definition and measurement of success affects program decisions. Highlights innovative performance and participant outcome metrics. Discusses approaches to collecting, storing, releasing, and destroying data, and the software used to collect, analyze, and report on program data.
- [Chapter #02](#) - **Survivor Access and Participant Selection** - Explores the distinct and overlapping roles of domestic violence (DV) shelters and transitional housing; the pathways that survivors take to get to transitional housing, and how providers select participants from among "competing" applicants for assistance; why providers might decline to serve certain candidates; who is and isn't served; and the regulatory and legal framework within which those processes occur.
- [Chapter #03](#) - **Program Housing Models** - Explores the strengths and challenges of alternate approaches to housing survivors in transitional housing and transition-in-place programs. Examines the pros and cons of time-limited housing vs. transition-in-place housing, congregate vs. clustered vs. scattered site housing, and provider-owned vs. provider-leased vs. participant-leased housing. Discusses how the type of housing can affect participant selection and the services offered.
- [Chapter #04](#) - **Taking a Survivor-Centered/Empowerment Approach: Rules Reduction, Voluntary Services, and Participant Engagement** - Examines the challenges, strategies, and implications of taking a survivor-centered/voluntary services approach, and how such an approach is integral to operating a trauma-informed program. Explores the potential impacts of funder expectations, choice of housing model, staffing patterns, and diverse participant needs and circumstances. Presents comments illustrating the range of providers' interpretations of and responses to the voluntary services requirement, including their approaches to supporting participant engagement and to addressing apparent lack of engagement. Discusses the concept of empowerment, presents comments illustrating the diverse ways that providers see and support survivor empowerment, and cites an innovative approach to measuring safety-related empowerment.
- [Chapter #05](#) - **Program Staffing** - Explores program staffing levels and the kinds of positions providers maintain; the attributes and qualifications that providers look for in the hiring process; and how they assess the value of having a clinician on staff, having child-focused staff, and having survivors on staff. Examines how programs support and supervise staff, and their approaches to staff training. Presents comments illustrating providers' diverse perspectives about utilizing volunteers, and describing how programs that do use volunteers screen, train, and support them.
- [Chapter #06](#) - **Length of Stay** - Explores funders' and providers' approaches to limiting or extending the duration of housing assistance and services, and the implication of those approaches.
- [Chapter #07](#) - **Subpopulations and Cultural/Linguistic Competence** – Discusses cultural and linguistic competence and how providers understand and work to achieve it in their programs. Presents diverse perspectives from the literature and online resources and from provider interviews about the challenges and approaches in serving specific subpopulations, including African American, Latina, Asian American, Native American/Alaska Native, Immigrant, LGBTQ, older adult, deaf, disabled, and ex-offender survivors. Includes an

extensive review of the challenges, approaches, and legal framework (e.g., non-discrimination, reasonable accommodation, fair housing) in serving survivors with disabling conditions that affect their mental health, cognition, and/or behavior, including trauma/PTSD, substance dependence, traumatic brain injury, and/or mental illness. Highlights OVW-funded collaborations to enhance the capacity of victim services providers to serve survivors with disabilities and of disability-focused agencies to serve consumers who are also survivors.

- [Chapter #08](#) - ***OVW Constituencies*** - Focuses on the needs and approaches to meeting the needs of survivors of sexual violence -- including survivors of rape and sexual assault, homeless victims of sexual violence, survivors of Military Sexual Trauma, and survivors of human sexual trafficking. Explores possible reasons why survivors of sexual assault constitute only a small percentage of the participants in OVW TH grant-funded programs, even though provider comments generally indicate an openness to serving such survivors. Includes a conversation with senior staff from the Victim Rights Law Center discussing possible options for expanding system capacity to serve sexual assault survivors.
- [Chapter #09](#) - ***Approach to Services: Providing Basic Support and Assistance*** - Explores different frameworks for providing advocacy /case management support (e.g., voluntary services, survivor empowerment, Housing First, Full Frame) and how motivational interviewing techniques could be helpful. Discusses survivor safety and how safety is assessed and addressed (e.g., danger and lethality assessment instruments, addressing batterer- and life-generated risks as part of safety planning, safe use of technology). Looks at strategies and practices for supporting community integration, and providing follow-up support to program alumni.
- [Chapter #10](#) - ***Challenges and Approaches to Obtaining Housing and Financial Sustainability*** - Examines the challenges survivors face in obtaining safe, decent, affordable housing and the approaches providers take to help them, and some useful resources. Explores the added challenges posed by poverty, and approaches and resources leveraged by providers to facilitate access to mainstream benefits, education and training, and decent employment. Other areas of focus include childcare and transportation, resources for persons with criminal records, workplace-related safety planning, and approaches and resources for supporting survivors in enhancing key skills, including financial management.
- [Chapter #11](#) - ***Trauma-Specific and Trauma-Informed Services for Survivors and Their Children*** – Discusses the nature, impacts, and manifestations of trauma; approaches to addressing trauma; what it means to be trauma-informed; and the steps providers take -- and can take -- to become more trauma-informed. Reviews the impact of trauma on children and families, especially the trauma of witnessing abuse of a parent; and discusses the challenges posed and approaches taken in addressing the effects of that trauma. Includes brief sections on custody and visitation.
- [Chapter #12](#) - ***Funding and Collaboration: Opportunities and Challenges*** - Examines sources of funding for TH programs, focusing on OVW and HUD grants -- the regulatory requirements, strengths and constraints of each funding source, and the challenges of operating a program with combined OVW/HUD funding. Explores the potential benefits, challenges, and limitations of partnerships and collaborations with mainstream housing/service providers, including confidentiality issues. Presents provider comments citing the benefits of being part of a statewide coalition; discussing the opportunities and challenges of participating in a Continuum of Care; and illustrating the range of gap-filling service agreements and collaborations with mainstream providers. Highlights published reports describing successful collaborations.

Although the report chapters attempt to divide the component aspects of transitional housing into neat categories, the reality is that many of those aspects are inextricably linked to one another: the definition of success, the housing model, and sources of funding play a key role in how services are provided; the housing model, sources of funding, and length of stay constraints can play a role in influencing participant selection; the subpopulations targeted and served and the program's approach to cultural/linguistic competency, the program's understanding and embrace of voluntary services, survivor-defined advocacy, and what it means to take a trauma-informed approach all inform how the program provides basic support and assistance; etc.

### **(b) Project Description: Overall Approach**

This project was originally conceived as a resource guide for "promoting best practices in transitional housing (TH) for survivors of domestic and sexual violence." However, over the course of our conversations with providers, it became clear that while there are certainly commonalities across programs -- for example, the importance of mutual trust and respect between participants and the providers that serve them, and the fundamental principles of survivor-defined advocacy and voluntary services -- there is no one-size-fits-all "best practices" template for providing effective transitional housing for survivors. Instead, there are a multitude of factors which go into determining providers' approaches:

Survivors from different demographics and circumstances may experience domestic and sexual violence differently and may respond differently to different service approaches. Age, class, race, cultural and linguistic background, religious affiliation, gender identity, sexual orientation, military status, disability status, and, of course, life experience all play a role in defining who a survivor is, how they experienced victimization, and what they might need to support healing and recovery. Each survivor's history of violence and trauma and its impact on their physical, physiological, emotional, and psychological wellbeing is different, and their path to recovery may require different types or intensities of support.

Where a program is located and how it is resourced plays a significant role in shaping a program, the challenges it faces, the opportunities it can take advantage of, the logistics of how housing and services are provided, and the kinds of supplementary resources the program might be able to leverage from other sources. Different parts of the country have different types of housing stock, different housing markets, different levels of supply and demand for affordable housing or housing subsidies, and different standards for securing a tenancy; different regions of the country have different economic climates, different labor markets, and different thresholds for entering the workforce; depending on where they are located, low income survivors could have very different levels of access to emergency financial assistance, health care, mental health care, addiction services, child care, transportation, legal assistance, immigration services, and/or other types of supplemental support.

"Best practices" for a stand-alone TH program in which a part time case manager serves a geographically scattered clientele in a rural, under-resourced region will mean something different than "best practices" for a well-resourced, full-service metropolitan-area provider that affords participants access to different types of transitional housing; that can leverage the support of culturally and linguistically diverse in-house staff and volunteers, that can contribute the services of in-house therapists, child specialists, employment specialists, and other adjunct staff; and that can rely upon nearby providers for additional gap-filling services.

"Best practices" in providing transitional housing for a chronically poor survivor whose education was interrupted, who has never been allowed to work, and who suffers from complex trauma as a result of childhood abuse may well look different from "best practices" in serving a survivor who is better educated, has a credible work history, but who was temporarily impoverished due to her flight from an abusive partner.

"Best practices" in serving a recent immigrant, with limited English proficiency, who lacks legal status, whose only contacts in America are her abusive partner's extended family -- will likely look different from "best practices" in serving a teenage girl who ran away from sexual abuse in her small town home, only to end up pregnant and in an abusive relationship, which she fled when he threatened to hurt her baby -- which, in turn, will look different from "best practices" for serving a middle-aged woman who tolerated her husband's abuse for years, because he supported the family and because she couldn't, and because keeping the family together was what her community and her church expected her to do, and what she would have continued to do until he finally went too far.

While there are commonalities to the approaches taken by the diverse programs awarded OVW TH grant funding, the very nature of the kind of "holistic, victim-centered approach ... that reflect[s] the differences and individual needs of victims and allow victims to choose the course of action that is best for them," called

for in the [OVW's annual solicitation for TH grant proposals](#), argues against too many generalizations about one-size-fits-all "best practices."

Recognizing that survivors from a broad spectrum of demographics and circumstances may have different needs and priorities and goals, may have and/or perceive different options for moving forward in their lives, and likewise, may have different definitions of "success," the OVW refrains from asking its TH grantees to render judgments about the quality of specific program outcomes.

In the absence of a consistent measurement of success and a framework for measuring differences in clientele and program operating environments -- that is, lacking a data-informed basis for assessing whether a particular intervention constitutes a "best" practice -- we chose to take a more descriptive approach for this report. Drawing from providers' own words, the literature, and online resources, we have attempted to frame and provide context for the broad range of challenges and choices that providers face; to describe and offer context for and examples of the approaches they take in furnishing transitional housing for survivors; and to highlight some of the unresolved issues and difficult questions that providers wrestle with.

### **(c) Project Methodology: Collection and Analysis of Data from Provider Interviews**

#### **(i) Development and Implementation of the Interview Protocol**

Drawing from information gleaned from the literature and online resources, and from some of the project and advisory team members' personal experience in working with transitional housing programs and/or providing services to survivors of domestic violence, we developed a list of topics and potential questions that we hoped to cover in our provider interviews.

Because there were so many potential subjects to discuss and only an hour to have those conversations, we divided the topics into separate interview protocols. In addition to basic descriptive information ("universal

topics")<sup>51</sup> that would be collected in each interview, we defined four distinct sets of topics<sup>52</sup> that would be sequentially assigned as interviews were scheduled. Over time, we eliminated certain areas of questioning from the interview protocol if we were not getting new information, and added topics or questions, as we identified gaps in our information. By the time half the interviews had been completed, the four lists of topics/subtopics had been condensed into three lists/interview protocols.

Pursuant to early discussions with the OVW, we agreed that the initial protocol would be "field-tested" by conducting interviews of staff from nine TH providers that the OVW identified and reached out to on our behalf. We also agreed that our interviews would be conversational and driven by the providers we were interviewing. That is, ***although we had lists of topics and questions that we might want to address, we would follow the lead of the provider to make sure we covered any issues or concerns or approaches that they wanted to highlight. Rather than asking a uniform series of questions, we would use our protocols as guides, rather than as interview scripts.*** To realize this objective, our team worked together to make sure we had the same general understandings of the protocol and the purpose of the interviews. The nine initial interviews were all conducted by pairs of team members, to facilitate full-team participation in our review of those interviews and in any revisions to the protocol based on that review.

Our team followed up the OVW's initial outreach to the nine providers with emails elaborating on the project (and attaching the OVW's initial letter), and providing supplemental information emphasizing the voluntary nature of participation and how ***provider responses would be kept confidential.***

Each interview began with an introduction of the project; an explanation of how we intended to create a resource document that would describe the what, how, and why of providers' efforts ***in their own words***; a

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<sup>51</sup> ***"Universal" Topics:*** Program size (number of units, individuals, families); type and configuration of program housing (e.g., temporary vs. transition-in-place; congregate vs. clustered vs. scattered-site; provider-owned vs. provider-leased vs. participant-leased); target constituency (e.g., survivors of domestic violence, sexual assault, etc.); type/number of direct services staff, use of consultants, involvement of other agency staff; other DV- or non-DV-focused programs operated by agency; how survivors access program and participant selection/prioritization; how staff understand the different roles of DV shelter vs. TH; characterization of service area (e.g., metropolitan area, small city, suburban, rural, mixed); program definition of a "successful" outcome and how program promotes success; how program implements voluntary services; maximum, typical, and targeted length of stay; other sources of funding; involvement with local or regional network of DV-focused providers and/or with Continuum of Care; most significant challenges faced by program; perceived differences between TH for other homeless populations and TH for survivors of domestic violence/sexual assault.

<sup>52</sup> ***Group 1 Topics:*** staffing details (roles, training, support, etc.); use of volunteers (roles, reasons for/against using, training and support); program philosophy and underlying approach (e.g., trauma-informed, empowerment, survivor-centered, etc.); consumer involvement (Board membership, advisory roles, options for current participants).

***Group 2 Topics:*** assistance obtaining housing (challenges faced, strategies used, partnerships, etc.); employment assistance (challenges faced, strategies pursued, partnerships, etc.); approach to working with participants with significant barriers (e.g., economic, mental health, substance abuse issues, etc.); child- and family-focused services (what triggers needs assessment, needs assessed, how needs are addressed and by whom, interface with schools); follow-up services (type offered, challenges faced, insights into utilization patterns).

***Group 3 Topics:*** challenges, advantages, and reasons for choosing type of program housing and approach to offering financial assistance with housing-related costs; distinctive subpopulations served (population-specific challenges and approach, challenges/approaches pertaining to serving a mixed clientele, etc.); meaning and dimensions of cultural competence; approach to ADA compliance in serving persons with disabilities; collaborations (strategies, challenges).

***Group 4 Topics:*** program rules and the consequences of violating them; performance measurement (formal vs. informal approach, specific measures, whether/how participant progress is measured and used to gauge program performance, impact on program design) ; approach to data collection (software used, data collected above and beyond funder requirements, compliance with HUD comparable data base requirement); funding opportunities and constraints (challenges/strategies for government and non-government funding); challenges and benefits of collaboration with local/regional HUD-funded planning entities (Continuum of Care, Consolidated Plan).

request to record the conversation; and an assurance that ***once the project was over, recordings and transcripts would be deleted, so that all that would be left would be anonymous comments***. We followed this same procedure throughout the project, eventually reaching out to almost 250 providers and securing the participation<sup>53</sup> of over 50%. Early on, we modified the process, per the request of some of the providers, and began sending a tentative list of topic areas along with the email confirming the date and time of each interview. The email emphasized, however, that the provider should feel free to steer the conversation as they saw fit, to make sure we covered any issues, concerns, or approaches that they wanted to highlight.

Starting with the first "field test" interviews in June 2014 and ending in February 2015, the project team completed interviews with 122 TH providers and one legal services provider that partnered with a TH provider (the Victim Rights Law Center, which asked to be specifically identified), and conducted a joint interview with two providers of LGBTQ domestic violence-related services (identified by Project Advisory Team members, in response to our request for help identifying experts who could help fill that information gap). The project director conducted 62% of the interviews and read the transcripts of all the other interviews.

Of the 122 providers, 92% (112 providers) were current recipients of OVW TH grants; another eight providers had recently lost their OVW grants and, at the time of their interview, were either operating a TH program with other funds, or had ceased TH operations. (Some of these providers subsequently received OVW TH grants.) Only two of the 122 TH providers interviewed had never received OVW TH grants (and were HUD- or state-funded). Fifty-one (42%) of the TH providers we interviewed were current recipients of one or more HUD Continuum of Care Transitional Housing (TH) or Rapid Rehousing (RRH) grants and/or a HUD Emergency Solutions Grant (ESG) RRH grant.

### ***(ii) Processing of Interview Data***

All interviews were submitted to a transcription service and the transcript was reviewed for accuracy (and corrected, as needed) by the project director. Transcripts of the interviews were entered into NVivo, a qualitative data analysis software, and then sentences or paragraphs that pertained to each of 27-30 project-defined topic areas<sup>54</sup> were coded as being related to that topic area. The project director performed the large majority of coding, and reviewed (and, as needed, modified) all of the coding decisions by the project associate, thereby ensuring coding consistency.

The selected provider comments pertaining to each topic area constituted a voluminous amount of data, and had to be boiled down, so that they could be shared with our Project Advisory Team members, and eventually incorporated into the report. Interview comments were edited for clarity and brevity, with an absolute emphasis on retaining the voice and essential message of provider comments. The interviewer's voice was removed. Names of people, places, and programs were removed and replaced with generic references to ensure confidentiality and anonymity, as had been promised to providers at the outset of each interview, and in our outreach correspondence. The project director did the overwhelming majority of all such editing, and reviewed (and, as needed, modified) all edits proposed by the project associate.

These compilations of provider comments (still averaging 20-30 pages, after editing) were shared with members of our Project Advisory Team and reviewed and discussed in a series of thirteen 90-minute meetings over the course of several months. Insights from those conversations, as well as information and perspectives from the literature and online sources were integrated into narratives that supplement the extensive presentation of provider comments in each of the twelve chapters.

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<sup>53</sup> We actually secured the participation of 130 providers; however, six interviews were not included in the analysis because the interviewee was not adequately familiar with the TH program, or the program was too new to have any experience, or the provider no longer operated the TH program and no longer had staff who could answer our questions.

<sup>54</sup> Several codes were consolidated as the coding process evolved.

Although this is a qualitative study and not quantitative research, we have included the large majority of the provider comments pertaining to each of the covered topics to provide the reader with not only a *sense of the range of challenges, approaches, and philosophies*, but also with a *sense of the frequency with which they were mentioned or reflected in provider comments*. Some of the comments will seem very similar to one another, some will differ by nuance, and some will be dramatically different.

This report does not include the very important perspective of victims/survivors. Collecting the feedback of survivors served by OVW TH grant-funded programs was deemed by the OVW to be outside the scope of the Technical Assistance grant that generously funded this project. Although our "*Snapshot of Transitional Housing for Survivors Of Domestic and Sexual Violence*" is missing that perspective, we hope it is nonetheless useful to the dedicated providers, researchers, and government officials who are committed to supporting and strengthening these and other efforts to address the scourge of domestic and sexual violence.

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